Filed 04/11/19 Entered 04/11/19 22:58:29 Desc Main Case 19-17445-JKS Doc 1 Document Page 1 of 63 Fill in this information to identify your case: United States Bankruptcy Court for the: District of New Jersey Case number (If known): _ Chapter you are filing under: ☑ Chapter 7 ☐ Chapter 11 ☐ Chapter 12 Check if this is an ☐ Chapter 13 amended filing Official Form 101 Voluntary Petition for Individuals Filing for Bankruptcy 12/17 The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: **Identify Yourself** About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): 1. Your full name Write the name that is on your Arlene government-issued picture First name First name identification (for example. т your driver's license or passport). Middle name Middle name Beckford Bring your picture Last name Last name identification to your meeting with the trustee. Suffix (Sr., Jr., II, III) Suffix (Sr., Jr., II, III) 2. All other names you have used in the last 8 First name First name years Middle name Include your married or Middle name maiden names. Last name Last name First name First name Middle name Middle name Last name Last name 3. Only the last 4 digits of xxx - xx - 5 5 3 6your Social Security xxx - xx - _____

(ITIN)

number or federal

Individual Taxpayer

Identification number

OR

9xx - xx -

OR

9 xx - xx -_____

Case 19-17445-JKS Doc 1 Filed 04/11/19 Entered 04/11/19 22:58:29 Desc Main Document

Page 2 of 63

Arlene Beckford Debtor 1 Case number (if known)_ Last Name Middle Name

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in	☑ I have not used any business names or EINs.	☐ I have not used any business names or EINs.
	the last 8 years	Business name	Business name
	Include trade names and doing business as names	Business name	Business name
		EIN	EIN
		EIN	EN — - — — — — —
5.	Where you live		If Debtor 2 lives at a different address:
•	,,,,,,,,		The second secon
		64 Lindsley Avenue	
		Number Street	Number Street
		Irvington NJ 07111	
		City State ZIP Code	City State ZIP Code
		Essex	- 불화 - 기구
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number Street	Number Street
		P.O. Box	P.O. Box
		City State ZIP Code	01-
		City State ZIP Code	City State ZIP Code
6.	Why you are choosing	Check one:	Check one:
	this district to file for	☑ Over the last 180 days before filing this petition,	
	bankruptcy	I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)
			(555 15 5) (555)
			11.4
n Arritaria			

Case 19-17445-JKS Doc 1 Filed 04/11/19 Entered 04/11/19 22:58:29 Desc Main Document Page 3 of 63

Debtor 1

Arlene First Name

idde Name

Beckford Last Name

Case number (if known)_

P	art 2: Tell the Court Abou	at Your B	ankrup	otcy Case				
7.	The chapter of the Bankruptcy Code you	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. Chapter 7						
	are choosing to file under							
		☐ Cha	pter 11					
		🔲 Cha	oter 12					
PS V X DIMEN	COMMING THE BANADON OF THE THE BUT OF THE BUT OF THE STATE OF THE STAT	☐ Cha	oter 13					
8.	How you will pay the fee	loca your subr	l court f self, yo nitting y	for more details a ou may pay with c	bout how you mash, cashier's c	ay pay. Typicall heck, or money	eck with the clerk's office in your ly, if you are paying the fee order. If your attorney is pay with a credit card or check	
							otion, sign and attach the onto	
		By la less pay	aw, a ju than 15 the fee	dge may, but is r 50% of the officia in installments).	not required to, value of the second to the	waive your fee, a at applies to you is option, you m	ion only if you are filing for Chapter 7. and may do so only if your income is ir family size and you are unable to sust fill out the Application to Have the with your petition.	
9.	Have you filed for bankruptcy within the	⊿ No	THE STATE OF THE S		AN TOTAL PROPERTY OF THE PARTY	and delicition and an appropriate property of the second s		
	last 8 years?	Yes.	District		When	MM / DD / YYYY	Case number	
			District		When		Case number	
			B. 17.			MM / DD / YYYY		
			District		When	MM / DD / YYYY	Case number	
10.	Are any bankruptcy	☑ No						
	cases pending or being filed by a spouse who is		Debtor				Relationship to you	
	not filing this case with you, or by a business partner, or by an affiliate?						Case number, if known	
			Debtor				Relationship to you	
			District		When	MM / DD / YYYY	Case number, if known	
11.	Do you rent your residence?	☑ No. ☐ Yes.	☐ No.	ur landlord obtaine . Go to line 12.	tement About an E		Against You (Form 101A) and file it as	

Case 19-17445-JKS Doc 1 Filed 04/11/19 Entered 04/11/19 22:58:29 Desc Main Document Page 4 of 63

Debtor	1

Arlene First Name

_				_	
_	_	_	I _J	c_	rd
-	2		~	r	ra
	•		n		

_	_	٠.	٠,
act	Ma	ma	

Case number (if known)_

	Are you a sole proprietor	☑ No. Go to Part 4. ☐ Yes. Name and location of business							
	of any full- or part-time business?								
	A sole proprietorship is a								
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or		Name of bus	iness, if any			,		
	LLC.		Number	Street		-			
	If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.					· · · · · · · · · · · · · · · · · · ·			
	to the potition.		City				State	ZIP Code	
			Check the a	appropriate i	hox to desc	ribe your busi	ness.		
							C. § 101(27A))		
							l.S.C. § 101(2177))))	
						J.S.C. § 101(• .	"	
				<u>.</u>		in 11 U.S.C.	,,		
			☐ None of				• • • • • • • • • • • • • • • • • • • •		
	11 U.S.C. § 101(51D).		the Bankrup	otcy Code. Inder Chapte				tor according to the defin	
						B		_	
1	rt 4: Report if You Own o	or Have	Any Hazar	rdous Prop	perty or A	ny Property	/ That Needs	Immediate Attention	n
	Do you own or have any	or Have ☑ No	Any Hazar	rdous Prop	perty or A	ny Property	/ That Needs	Immediate Attention	n
 	Do you own or have any property that poses or is alleged to pose a threat	·			perty or A	ny Propert	/ That Needs	Immediate Attention	n
	Do you own or have any property that poses or is	☑ No			perty or A	ny Propert	/ That Needs	Immediate Attention	n
II di	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety?	☑ No			perty or A	ny Propert	/ That Needs	Immediate Attention	n
	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs	☑ No	What is the	e hazard?				Immediate Attention	
I I i	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?	☑ No	What is the	e hazard?		why is it need		Immediate Attention	
	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs	☑ No	What is the	e hazard?				Immediate Attention	
	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building	☑ No	What is the	e hazard?	is needed,	why is it need		Immediate Attention	n
	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building	☑ No	What is the	e hazard?	is needed,			Immediate Attention	n
	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building	☑ No	What is the	e hazard?	is needed,	why is it need		Immediate Attention	n
. I i i i i i i i i i i i i i i i i i i	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building	☑ No	What is the	e hazard?	is needed,	why is it need		Immediate Attention	

Case 19-17445-JKS Doc 1 Filed 04/11/19 Entered 04/11/19 22:58:29 Desc Main Document Page 5 of 63

Debtor 1

Arlene

Middle Name

Beckford

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About	De	abto	r:1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before ! filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing	about
credit counseling because of:	

I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

u	I am not required	to receive a	briefing about
	credit counseling	because of:	

Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or

through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 19-17445-JKS Doc 1 Filed 04/11/19 Entered 04/11/19 22:58:29 Desc Main Document Page 6 of 63

Debtor 1

Arlene First Name

Beckford Last Name

Case number (if known)

P	art 6: Answer These Ques	stions for Reporting Purposes						
16.	What kind of debts do you have?	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."						
	,	☐ No. Go to line 16b. ☐ Yes. Go to line 17.						
		16b. Are your debts primarily I money for a business or invest	business debts? Busine ment or through the operation	ess debts are debts that you incurred to ion of the business or investment.	obtain			
		No. Go to line 16c.Yes. Go to line 17.						
		16c. State the type of debts you own	e that are not consumer del	bts or business debts.				
17.	Are you filing under Chapter 7?	☐ No. I am not filing under Chapte	er 7. Go to line 18.					
	Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	Yes. I am filing under Chapter 7. administrative expenses and No	Do you estimate that after e paid that funds will be ava	any exempt property is excluded and ailable to distribute to unsecured credito	rs?			
18.	How many creditors do you estimate that you owe?	2 1-49 □ 50-99 □ 100-199 □ 200-999	☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000	25,001-50,000 50,001-100,000 More than 100,000	eti kanadari kanadar			
19.	How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 mil	on \$1,000,000,001-\$10 ion \$10,000,000,001-\$5	billion 0 billion			
20.	How much do you estimate your liabilities to be?	□ \$0-\$50,000 □ \$50,001-\$100,000 □ \$100,001-\$500,000 ☑ \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 millio \$50,000,001-\$100 millio \$100,000,001-\$500 mi	on \$1,000,000,001-\$10 ion \$10,000,000,001-\$5i	billion 0 billion			
Pa	7: Sign Below			— More than \$50 billion				
Fo	r you	I have examined this petition, and I correct.	declare under penalty of per	rjury that the information provided is tru	e and			
		If I have chosen to file under Chapte of title 11, United States Code. I und under Chapter 7.	r 7, I am aware that I may perstand the relief available	proceed, if eligible, under Chapter 7, 11 under each chapter, and I choose to pr	,12, or 13 oceed			
		If no attorney represents me and I dithis document, I have obtained and r	d not pay or agree to pay see ad the notice required by	comeone who is not an attorney to help 11 U.S.C. § 342(b).	me fill out			
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.						
		I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.						
		Signature of Debtor 1	o juin	Signature of Debtor 2				
		Executed on 04/07/2019 MM / DD /YYYY	<u> </u>	Executed on				

Case 19-17445-JKS Doc 1 Filed 04/11/19 Entered 04/11/19 22:58:29 Desc Main Document Page 7 of 63

Debtor 1	Arlene First Name Middle Nam	Beckford e Last Name	Case number (if known	7)
represer If you are by an att	attorney, if you are nted by one e not represented corney, you do not file this page.	I, the attorney for the debtor(s) named to proceed under Chapter 7, 11, 12, or available under each chapter for which the notice required by 11 U.S.C. § 3426 knowledge after an inquiry that the info	13 of title 11, United States Code, the person is eligible. I also certify (b) and, in a case in which § 707(b)	and have explained the relief that I have delivered to the debtor(s) (4)(D) applies, certify that I have no
		Roman Akopian Printed name The Law Office of Roman Alerim name 69 Merkel Drive Number Street	kopian	

Bloomfield

City

Email address romanakopian.law@gmail.com

07003

ZIP Code

NJ

State

017672012	NJ
Bar number	State

Fill in this inf	formation to ide	ntify your case:		
Debtor 1	Arlene First Name	Middle Name	Beckford Last Name	+
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court fo	r the: District of New Jersey		
Case number (If known)		***	_	

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT	an attorney to help you fill out bankruptcy forms?
√ No	
☐ Yes. Name of person	. Attach Bankruptcy Petition Preparer's Notice, Declaration, and
	Signature (Official Form 119).
Linday populty of parium, I dealars that I have rece	d the cummany and ashedular filed with this deployation and
that they are true and correct.	d the summary and schedules filed with this declaration and
* Aller Bellin	
Signature of Debtor 1	Signature of Debtor 2
	-
Date 04/07/2019	Date
MM / DD / YYYY	MM/ DD / YYYY

Case 19-17445-JKS Doc 1 Filed 04/11/19 Entered 04/11/19 22:58:29 Desc Main Document Page 9 of 63

Fill in this in	nformation to ide	entify your case:	
Debtor 1	Arlene First Name	T Middle Name	Beckford Last Name
Debtor 2 (Spouse, if filing)) First Name	Middle Name	Last Name
United States	Bankruptcy Court fo	or the: District of New Jersey	
Case number	(If known)	#A *	_

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B)	s 310,000.00
1a. Copy line 55, Total real estate, from Schedule A/B	Ψ
1b. Copy line 62, Total personal property, from Schedule A/B	\$31,755.00
1c. Copy line 63, Total of all property on Schedule A/B	\$ 341,755.00
	, ,
art 2: Summarize Your Liabilities	
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	Your liabilities Amount you owe \$ 516,449.51
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$ 110,276.26
Your total liabilities	\$ 626,725.77
Summarize Your Income and Expenses	
Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$2,391.85
Schedule J: Your Expenses (Official Form 106J)	s 2,385.81

Entered 04/11/19 22:58:29 Case 19-17445-JKS Doc 1 Filed 04/11/19 Document

9g. Total. Add lines 9a through 9f.

Arlene

Case number (if known),

Debtor 1

Beckford

Page 10 of 63

Part 4: **Answer These Questions for Administrative and Statistical Records** 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? 🔲 No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. **☑** Yes 7. What kind of debt do you have? ☑ Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official 3,312.82 Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: Total claim From Part 4 on Schedule E/F, copy the following: 0.00 9a. Domestic support obligations (Copy line 6a.) 0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) 0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) 43,594.34 9d. Student loans. (Copy line 6f.) 9e. Obligations arising out of a separation agreement or divorce that you did not report as 0.00 priority claims. (Copy line 6g.) 0.00 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

43,594.34

Case 19-17445-JKS Doc 1 Filed 04/11/19 Entered 04/11/19 22:58:29 Desc Main

			Document Page 11 of 63		
Fill in this	information to identify y	our case and this			
	Arlene		Beckford		
Debtor 1	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing	g) First Name	Middle Name	Last Name		
United State	s Bankruptcy Court for the: D	istrict of New Jers	ev		
Case numbe					
		-		☐ Check if this is a	an
				amended filing	
Officia	I Form 106A/B	_			
Sche	edule A/B:	Property	v	12/15	
category v responsib write your	where you think it fits be le for supplying correct rname and case number	st. Be as comple information. If me (if known). Answ	s. List an asset only once. If an asset fits in more the and accurate as possible. If two married people ore space is needed, attach a separate sheet to the every question. Land, or Other Real Estate You Own or Have	e are filing together, both are equally is form. On the top of any additional page	s,
1. Do you	own or have any legal or	equitable interes	et in any residence, building, land, or similar prop	erty?	_
□ No.	Go to Part 2.		, , , , , , , , , , , , , , , , , , ,	•	
☑ Yes.	Where is the property?		M. 41 II		
1.1.	64 Lindsley Avenue treet address, if available, or o	About	What is the property? Check all that apply. Single-family home Duplex or multi-unit building	Do not deduct secured claims or exemptions. Puthe amount of any secured claims on Schedule Creditors Who Have Claims Secured by Property	D:
_	neet address, ii available, Di t	oner description	□ Condominium or cooperative□ Manufactured or mobile home□ Land	Current value of the entire property? \$ 310,000.00 \$ 310,000.00	?
_		NJ 07111 State ZIP Code	Investment propertyTimeshare	Describe the nature of your ownership	_
·	,	AUTO EN GOUE	Other	interest (such as fee simple, tenancy by the entireties, or a life estate), if known.	!
			Who has an interest in the property? Check one.		
_	ssex		Debtor 1 only Debtor 2 only		
C	ounty		Debtor 1 and Debtor 2 only At least one of the debtors and another	Check if this is community property (see instructions)	
			Other information you wish to add about this it property identification number:		
If you ov	vn or have more than one,	list here:			
1.2. <u> </u>	treet address, if available, or c	that description	What is the property? Check all that apply. ☐ Single-family home ☐ Duplex or multi-unit building	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule in Creditors Who Have Claims Secured by Propert	D: y.
3.	reet address, ii available, or c	urier description	Condominium or cooperativeManufactured or mobile home	Current value of the entire property? Current value of the portion you own?	he
_	4,,		Land	\$	
C	ity S	State ZIP Code	☐ Investment property ☐ Timeshare ☐ Other	Describe the nature of your ownership interest (such as fee simple, tenancy by	
			Who has an interest in the property? Check one.	the entireties, or a life estate), if known.	
			Debtor 1 only		
C	ounty		Debtor 2 only Debtor 1 and Debtor 2 only	Check if this is community property	
			- Deduct I and Deduct 2 only	— □ Check it this is community property.	

At least one of the debtors and another

property identification number: ___

Other information you wish to add about this item, such as local

(see instructions)

1.3.	Street address, if available	e, or other description	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative	Do not deduct secured cla the amount of any secure Creditors Who Have Clair Current value of the entire property?	d claims on Schedule D ms Secured by Property.
	City	State ZIP Code	□ Manufactured or mobile home □ Land □ Investment property □ Timeshare □ Other	Describe the nature of interest (such as fee the entireties, or a life	simple, tenancy by
	County		Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this its property identification number:	Check if this is co (see instructions) em, such as local	ommunity property
Add t	the dollar value of the phaye attached for Part	portion you own for a 1. Write that number l	II of your entries from Part 1, including any entries	s for pages	\$310,000.0
art 2: oyou	Describe Your \	al or equitable intere	st in any vehicles, whether they are registered or	not? Include any vehicle:	s
you u own Cars	own, lease, or have leg that someone else drive , vans, trucks, tractors,	gal or equitable intereses. If you lease a vehicle	e, also report it on Schedule G: Executory Contracts	not? Include any vehicle: and Unexpired Leases.	s
you u own Cars	own, lease, or have leg that someone else drive , vans, trucks, tractors, lo	al or equitable intere es. If you lease a vehicl , sport utility vehicles	e, also report it on <i>Schedule G: Executory Contracts</i> and a motorcycles	and Unexpired Leases.	
you I own Cars	own, lease, or have leg that someone else drive , vans, trucks, tractors, lo es Make:	al or equitable intereses. If you lease a vehicles, sport utility vehicles	e, also report it on Schedule G: Executory Contracts i, motorcycles Who has an interest in the property? Check one.	and Unexpired Leases. Do not deduct secured clathe amount of any secure	aims or exemptions. Pur d claims on <i>Schedule L</i>
you own Cars	own, lease, or have leg that someone else drive , vans, trucks, tractors, lo es Make: Model:	jal or equitable intereses. If you lease a vehicles, sport utility vehicles Nissan Juke	e, also report it on <i>Schedule G: Executory Contracts</i> ; motorcycles Who has an interest in the property? Check one. Debtor 1 only	and Unexpired Leases. Do not deduct secured cla	aims or exemptions. Pu d claims on <i>Schedule I</i> ns Secured by Property
you lown Cars III N	own, lease, or have leg that someone else drive, vans, trucks, tractors, lo les Make: Model: Year:	al or equitable intereses. If you lease a vehicles, sport utility vehicles Nissan Juke 2013	e, also report it on Schedule G: Executory Contracts i, motorcycles Who has an interest in the property? Check one.	Do not deduct secured clathe amount of any secure Creditors Who Have Clair	aims or exemptions. Pu d claims on <i>Schedule E</i> ms Secured by Property Current value of t
you I own Cars II N	own, lease, or have leg that someone else drive, vans, trucks, tractors, lo es Make: Model: Year: Approximate mileage:	jal or equitable intereses. If you lease a vehicles, sport utility vehicles Nissan Juke	e, also report it on Schedule G: Executory Contracts, motorcycles Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	and Unexpired Leases. Do not deduct secured clathe amount of any secure Creditors Who Have Clair	aims or exemptions. Pu d claims on Schedule I ms Secured by Property Current value of t
you I own Cars II N	own, lease, or have leg that someone else drive, vans, trucks, tractors, lo les Make: Model: Year:	al or equitable intereses. If you lease a vehicles, sport utility vehicles Nissan Juke 2013	e, also report it on Schedule G: Executory Contracts on motorcycles Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured clathe amount of any secure Creditors Who Have Clair	aims or exemptions. Pu d claims on Schedule I ns Secured by Property Current value of t portion you own?
you Jown Cars N Y 3.1.	own, lease, or have leg that someone else drive, vans, trucks, tractors, lo es Make: Model: Year: Approximate mileage:	Nissan Juke 2013 109K	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see	Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the entire property?	aims or exemptions. Pu d claims on Schedule I ns Secured by Property Current value of t portion you own?
you I own Cars I N I Y 3.1.	own, lease, or have leg that someone else drive , vans, trucks, tractors, to es Make: Model: Year: Approximate mileage: Other information:	Nissan Juke 2013 109K	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see	Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the entire property? \$ 6,500.00	aims or exemptions. Pud claims on Schedule Ens Secured by Property Current value of the portion you own? \$ 6,500.0
you Jown Cars N Y 3.1.	own, lease, or have leg that someone else drive , vans, trucks, tractors, lo es Make: Model: Year: Approximate mileage: Other information:	Nissan Juke 2013 109K	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the entire property? \$ 6,500.00	aims or exemptions. Purd claims on Schedule Ens Secured by Property Current value of to portion you own? \$6,500.0000000000000000000000000000000000
you Jown Cars N V	own, lease, or have leg that someone else drive , vans, trucks, tractors, to les Make: Model: Year: Approximate mileage: Other information:	Nissan Juke 2013 109K	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the entire property? \$ 6,500.00 Do not deduct secured clathe amount of any secure Creditors Who Have Clair	aims or exemptions. Pur d claims on Schedule E ms Secured by Property Current value of t portion you own? \$ 6,500.0
you Jown Cars N V	own, lease, or have leg that someone else drive , vans, trucks, tractors, lo les Make: Model: Year: Approximate mileage: Other information: I own or have more than Make: Model: Year:	Nissan Juke 2013 109K	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the entire property? \$ 6,500.00 Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the	aims or exemptions. Pur d claims on Schedule Ens Secured by Property Current value of t portion you own? \$ 6,500.0 aims or exemptions. Put d claims on Schedule Ens Secured by Property Current value of t
Cars O you O you O you O and O a	own, lease, or have leg that someone else drive , vans, trucks, tractors, to les Make: Model: Year: Approximate mileage: Other information:	Nissan Juke 2013 109K	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the entire property? \$ 6,500.00 Do not deduct secured clathe amount of any secure Creditors Who Have Clair	aims or exemptions. Pud claims on Schedule Ens Secured by Property Current value of the portion you own? \$ 6,500.0

Case 19-17445-JKS Filed 04/11/19 Entered 04/11/19 22:58:29 Desc Main Docing for Page 13 of Solumber (18 hours)______ Debtor 1 Who has an interest in the property? Check one. 3.3. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: ☐ Check if this is community property (see instructions) Who has an interest in the property? Check one. 3.4. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories Z No Yes Who has an interest in the property? Check one. 4.1. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Other information: At least one of the debtors and another entire property? portion you own? ☐ Check if this is community property (see instructions) If you own or have more than one, list here: Who has an interest in the property? Check one. 4.2. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another

instructions)

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages

you have attached for Part 2. Write that number here

☐ Check if this is community property (see

6.500.00

Case 19-17445-JKS Doc 1 Filed 04/11/19 Entered 04/11/19 22:58:29 Desc Main Arlene Document Plant Name Last Name Last

Part 3:	Describe	Your	Personal	and	Household	Items
. a	Describe	I VUI	r Ci Sviigi	anu	HOUSEHOLD	rema

bo you own or have any legal or equitable interest in any of the following items?	Current value of the portion you own?
	Do not deduct secured claims or exemptions.
6. Household goods and furnishings	
Examples: Major appliances, furniture, linens, china, kitchenware	
No No Possible O I I I I I I I I I I I I I I I I I I	0.000.00
Yes. Describe Couches, dinning room set, bedroom set, refrigerator, vacuum, washer/dryer, TV stand, Lawn mower and blower	\$
7. Electronics	
Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games	
☐ No ☐ Yes. Describe	\$1,025.00
8. Collectibles of value	
Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles	
☑ No ☐ Yes. Describe	
163. Describe	\$
9. Equipment for sports and hobbies	
Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments	
20 No	
☐ Yes. Describe	\$
10. Firearms	
Examples: Pistols, rifles, shotguns, ammunition, and related equipment No	
Yes. Describe	\$
11. Clothes	
Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No	
Yes. Describe Clothes, shoes and accessories	\$1,000.00
12. Jewelry	
Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver	
□ No	
Yes. Describe Costume Jewelry	\$
13. Non-farm animals	
Examples: Dogs, cats, birds, horses	
☑ No	
Yes. Describe	\$
14. Any other personal and household items you did not already list, including any health aids you did not list	:
☑ No	:
Yes. Give specific information	\$
15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here	\$\$

Case 19-17445-JKS

Doc 1 Filed 04/11/19 Entered 04/11/19 22:58:29 Desc Main Doc Best Main Page 15 of 83 number (if known)______

Do you own or have any I	Current value of the portion you own? Do not deduct secured claim					
16. Cash <i>Examples:</i> Money you h	nave in your wallet, in your hon	ne, in a safe deposit box, and on hand when you file yo	ur petition			
☐ No						
2 Yes		Cash	1:	\$	100.00	
17. Deposits of money <i>Examples:</i> Checking, so and other sides.	avings, or other financial accoເ milar institutions. If you have rr	ints; certificates of deposit; shares in credit unions, bro iultiple accounts with the same institution, list each.	kerage houses,			
□ No						
☑ Yes		Institution name:				
	17.1. Checking account:	Chase		\$	2,000.00	
	17.2. Checking account:			\$		
	17.3. Savings account:			\$		
	17.4. Savings account:			\$		
	17.5. Certificates of deposit:			\$		
	17.6. Other financial account:			\$		
	17.7. Other financial account:			\$		
	17.8. Other financial account:					
	17.9. Other financial account:	1000				
	or publicly traded stocks	erage firms, money market accounts				
✓ No	myodanom accounte with bron	orage mine, meney market accounts				
☐ Yes	Institution or issuer name:					
			<u> </u>	\$		
				\$		
				\$		
19. Non-publicly traded s an LLC, partnership, a	-	orated and unincorporated businesses, including a	n interest in			
🗹 No	Name of entity:		f ownership:			
Yes. Give specific information about		0%		\$		
them		0%		\$		
		0%	n			

Case 19-17445-JKS Doc 1 Filed 04/11/19 Entered 04/11/19 22:58:29 Desc Main Arlene Doc Benderal Page 16 of Snumber (if known) Last Name

_		ks, cashiers' checks, promissory notes, and money orders. nnot transfer to someone by signing or delivering them.		
✓ No✓ Yes. Give specific information about	Issuer name:			
them		1,200	\$	
	•			
			\$	
-		01(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans		
☐ No				
Yes. List each account separately.	Type of account:	Institution name:		
, ,	401(k) or similar plan:	403b Retirement Account	\$	18,000.00
	Pension plan:		\$	
	IRA:		·—	
	Retirement account:			
	Keogh;	PARAMETER III	-	
	Additional account:		\$	
	Additional account:		\$	
	· · ·	nade so that you may continue service or use from a company		
Your share of all unused	d deposits you have m	nade so that you may continue service or use from a company d rent, public utilities (electric, gas, water), telecommunications		
Your share of all unused Examples: Agreements companies, or others	d deposits you have m with landlords, prepai			
Your share of all unused Examples: Agreements companies, or others No	d deposits you have m with landlords, prepai	d rent, public utilities (electric, gas, water), telecommunications	\$	
Your share of all unused Examples: Agreements companies, or others	d deposits you have m with landlords, prepai	d rent, public utilities (electric, gas, water), telecommunications	\$ \$	
Your share of all unused Examples: Agreements companies, or others No	d deposits you have m with landlords, prepai Institute the second of th	d rent, public utilities (electric, gas, water), telecommunications	\$ \$ \$	
Your share of all unused Examples: Agreements companies, or others No	d deposits you have m with landlords, prepai Institute the second of th	d rent, public utilities (electric, gas, water), telecommunications	\$ \$ \$	
Your share of all unused Examples: Agreements companies, or others No	d deposits you have m with landlords, prepai Institute the second of th	d rent, public utilities (electric, gas, water), telecommunications	\$ \$	
Your share of all unused Examples: Agreements companies, or others No	d deposits you have m with landlords, prepaid line Electric: Gas: Heating oil: Security deposit on read Prepaid rent: Telephone:	d rent, public utilities (electric, gas, water), telecommunications	\$ \$	
Your share of all unused Examples: Agreements companies, or others No	d deposits you have me with landlords, prepaid letters: Gas: Heating oil: Security deposit on recovered rent: Telephone: Water:	d rent, public utilities (electric, gas, water), telecommunications	\$ \$	
Your share of all unused Examples: Agreements companies, or others No	d deposits you have m with landlords, prepaid line Electric: Gas: Heating oil: Security deposit on reception prepaid rent: Telephone: Water: Rented furniture:	d rent, public utilities (electric, gas, water), telecommunications	\$\$ \$\$ \$\$	
Your share of all unused Examples: Agreements companies, or others No	d deposits you have me with landlords, prepaid letters: Gas: Heating oil: Security deposit on recovered rent: Telephone: Water:	d rent, public utilities (electric, gas, water), telecommunications	\$\$ \$\$ \$\$	
Your share of all unused Examples: Agreements companies, or others ☑ No ☐ Yes	d deposits you have me with landlords, prepaid left. Electric: Gas: Heating oil: Security deposit on recovery deposit on recovery deposit. Telephone: Water: Rented furniture: Other:	d rent, public utilities (electric, gas, water), telecommunications stitution name or individual: http://doi.org/10.1001/10.0001	\$\$ \$\$ \$\$	
Your share of all unused Examples: Agreements companies, or others No Yes	d deposits you have me with landlords, prepaid left. Electric: Gas: Heating oil: Security deposit on recovery deposit on recovery deposit. Telephone: Water: Rented furniture: Other:	d rent, public utilities (electric, gas, water), telecommunications	\$\$ \$\$ \$\$	
Your share of all unused Examples: Agreements companies, or others No Yes	d deposits you have me with landlords, prepaid rent: Telephone: Water: Rented furniture: Other:	d rent, public utilities (electric, gas, water), telecommunications stitution name or individual: ntal unit: of money to you, either for life or for a number of years)	\$\$ \$\$ \$\$	
Your share of all unused Examples: Agreements companies, or others No Yes	d deposits you have me with landlords, prepaid left. Electric: Gas: Heating oil: Security deposit on recovery deposit on recovery deposit. Telephone: Water: Rented furniture: Other:	d rent, public utilities (electric, gas, water), telecommunications stitution name or individual: ntal unit: of money to you, either for life or for a number of years)	\$\$ \$\$ \$\$	
Examples: Agreements companies, or others No Yes	d deposits you have me with landlords, prepaid rent: Telephone: Water: Rented furniture: Other:	d rent, public utilities (electric, gas, water), telecommunications stitution name or individual: ntal unit: of money to you, either for life or for a number of years)	\$\$ \$\$ \$\$	

Case 19-17445-JKS Arlene

Doc 1 Filed 04/11/19 Entered 04/11/19 22:58:29 Desc Main Doc 1 Page 17 of 8 9 number (# known) Doc 1 Page 17 of 8 9 number (# known) Desc Main

Debtor 1

26 U.S.C. §§ 530(b)(1), 529A(b), a	an account in a qualified ABLE program, or under a qualified state tuition pand 529(b)(1).	•
☑ No		
☐ YesIns	stitution name and description. Separately file the records of any interests.11 U.S	.C. § 521(c):
		¢.
		\$
	- 100 m	\$
_		
25. Trusts, equitable or future intere	ests in property (other than anything listed in line 1), and rights or powers	
exercisable for your benefit		
☑ No		
☐ Yes. Give specific		
information about them		\$
	s, trade secrets, and other intellectual property s, websites, proceeds from royalties and licensing agreements	\$
27. Licenses, franchises, and other	general intangibles	
	sive licenses, cooperative association holdings, liquor licenses, professional licenses	nses
🗹 No		
Yes. Give specific		1-20-01-0-1-0-0-0-0-0-0-0-0-0-0-0-0-0-0-
information about them		\$
28. Tax refunds owed to you ☑1 No		portion you own? Do not deduct secured claims or exemptions.
☐ Yes. Give specific information		\$
Yes. Give specific information about them, including who	nether	\$ \$
☐ Yes. Give specific information	nether Irns State:	\$ \$ \$
☐ Yes. Give specific information about them, including who you already filed the return them.	nether state:	\$ \$ \$
Yes. Give specific information about them, including who you already filed the return and the tax years	alimony, spousal support, child support, maintenance, divorce settlement, prope	\$ \$ \$rty settlement
Yes. Give specific information about them, including who you already filed the return and the tax years	alimony, spousal support, child support, maintenance, divorce settlement, prope	\$ \$ \$ rty settlement
Yes. Give specific information about them, including who you already filed the return and the tax years	alimony, spousal support, child support, maintenance, divorce settlement, prope Alimony:	\$
Yes. Give specific information about them, including who you already filed the return and the tax years	alimony, spousal support, child support, maintenance, divorce settlement, prope Alimony: Maintenan	\$ ce: \$
Yes. Give specific information about them, including who you already filed the return and the tax years	alimony, spousal support, child support, maintenance, divorce settlement, prope Alimony: Maintenan Support:	\$ ce: \$ \$
Yes. Give specific information about them, including who you already filed the return and the tax years	alimony, spousal support, child support, maintenance, divorce settlement, prope Alimony: Maintenan Support: Divorce se	\$ ce: \$ \$ ttlement: \$
Yes. Give specific information about them, including who you already filed the return and the tax years	alimony, spousal support, child support, maintenance, divorce settlement, prope Alimony: Maintenan Support:	\$ ce: \$ \$ ttlement: \$
 Yes. Give specific information about them, including why you already filed the return and the tax years. 29. Family support Examples: Past due or lump sum: ✓ No ☐ Yes. Give specific information. 30. Other amounts someone owes yexamples: Unpaid wages, disability Social Security benefit 	alimony, spousal support, child support, maintenance, divorce settlement, prope Alimony: Maintenan Support: Divorce se Property se	\$ ce: \$ \$ ttlement: \$ ettlement: \$
Yes. Give specific information about them, including whe you already filed the return and the tax years	alimony, spousal support, child support, maintenance, divorce settlement, prope Alimony: Maintenan Support: Divorce se Property se you ity insurance payments, disability benefits, sick pay, vacation pay, workers' comits; unpaid loans you made to someone else	\$ ce: \$ \$ ttlement: \$ ettlement: \$
 Yes. Give specific information about them, including why you already filed the return and the tax years. 29. Family support Examples: Past due or lump sum: ✓ No ☐ Yes. Give specific information. 30. Other amounts someone owes yexamples: Unpaid wages, disability Social Security benefit 	alimony, spousal support, child support, maintenance, divorce settlement, prope Alimony: Maintenan Support: Divorce se Property se you ity insurance payments, disability benefits, sick pay, vacation pay, workers' comits; unpaid loans you made to someone else	\$ ce: \$ ttlement: \$ ettlement: \$

Case 19-17445-JKS Doc 1 Filed 04/11/19 Entered 04/11/19 22:58:29 Desc Main Arlene Doc 1 Page 18 of 8 number (# known) Last Name

D.	~h	+~-
U	еĐ	tor

31.	Interests in insurance policies Examples: Health, disability, or life insurance Mo	ce; health savings account (HSA);	credit, homeowner's, or renter's insurance	
	Yes. Name the insurance company of each policy and list its value	Company name:	Beneficiary:	Surrender or refund value:
				\$
				\$
		· · · · · · · · · · · · · · · · · · ·		\$
32.	Any interest in property that is due you of five are the beneficiary of a living trust, exproperty because someone has died. No Yes. Give specific information	cpect proceeds from a life insurance	ce policy, or are currently entitled to receive	
		тарат таратын т		\$
33.	Claims against third parties, whether or Examples: Accidents, employment disputes No	s, insurance claims, or rights to su		····
	Yes. Describe each claim.			\$
34.	Other contingent and unliquidated claim to set off claims No			
	Yes. Describe each claim			\$
	£.	A 20,000 A	en e	
		P-4		
35.	Any financial assets you did not already No	list		
	Yes. Give specific information			
				
36.	Add the dollar value of all of your entries		ries for pages you have attached	s 20,100.00
	a control cont	gerynen er er en y kagerykkykske ekser met en yken plaagske sementa sens i er, i met eist met		and the the same and the contract the the contract the same that the same that the same the s
Pa	Describe Any Business-I	Related Property You Ow	n or Have an Interest In. List any r	eal estate in Part 1.
37.	Do you own or have any legal or equitab	le interest in anv business-relat	ed property?	
	☑ No. Go to Part 6.	•	,	
	Yes. Go to line 38.			
				Current value of the portion you own? Do not deduct secured claims or exemptions.
38.	Accounts receivable or commissions yo	u already earned		
	□ No			7
	Yes. Describe			\$
39	Office equipment, furnishings, and supp	blies		1
	Examples: Business-related computers, software		nes, rugs, telephones, desks, chairs, electronic devices	
	No Programme and the second and the	**************************************		1
	Yes. Describe			\$
	Self-AMA Perichan-Principal Control of the Control of C			···3

19-17445-JKS Filed 04/11/19 Entered 04/11/19 22:58:29 Desc Main Debtor 1 Document (it known)___ 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade ☐ No Yes. Describe.... 41. Inventory ☐ No ☐ Yes. Describe... 42. Interests in partnerships or joint ventures Yes. Describe...... Name of entity: % of ownership: 43. Customer lists, mailing lists, or other compilations ☐ No Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? ☐ Yes. Describe...... 44. Any business-related property you did not already list ☐ No ☐ Yes. Give specific information 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached 0.00 for Part 5. Write that number here Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? Mo. Go to Part 7. ☐ Yes. Go to line 47. Current value of the portion you own? Do not deduct secured claims or exemptions. 47. Farm animals Examples: Livestock, poultry, farm-raised fish ☐ No ☐ Yes.....

Debtor 1	Case 19-1 Arlene First Name	.7445-JKS	Doc 1	Filed 04 DocBase	/11/19 ¶d Pa	Entered age 20 of	1 04/11/19 22:58:29 68number (# known)	Desc Main
8. Crops-	either growin	g or harvested						
☐ No ☐ Yes	_	MINISTERIO PARENTA I MATERIA MATERIA (MATERIA MATERIA MATERIA MATERIA MATERIA MATERIA MATERIA MATERIA MATERIA M	***OUT OF THE STATE OF THE STAT	THE STATE OF THE S	THE STATE OF THE S			\$
☐ No		pment, impleme	ents, machin	ery, fixtures,	and tools			
	S			portuguis and a contract of the contract of th	***********************			\$
☐ No		olies, chemicals	, and feed		***************************************	***************************************		announce mag
								\$
☐ No		ercial fishing-rela	• •	• •	•	st		
	ormation	amen a demonstrativos activos activos antigrandos y de principal de de describir de describir de describir de d				es for pages	you have attached	\$
Example No Yes	es: Season tickets s. Give specific ormation	operty of any kir country club memb	pership			here		\$ \$ \$
Part 8:	List the T	otals of Each	Part of t	his Form	1927-1942 250 1952 27 14 14 14 14 14 14 14 14 14 14 14 14 14	a		SSA"A SEESTE SEE SEE SEE SEE SEE SEE SEE SEE
5. Part 1:	Total real esta	e, line 2						→ \$310,000.00
6. Part 2:	Total vehicles,	line 5			\$	6,500.00		Same of the second seco
7. Part 3:	Total personal	and household	items, line 1	5	\$	3,955.00		
8. Part 4:	Total financial	assets, line 36			\$	20,100.00		
9. Part 5:	Total business	-related propert	y, line 45		\$	0.00		
0. Part 6:	Total farm- and	l fishing-related	property, lir	ne 52	\$	0.00		
1. Part 7:	Total other pro	perty not listed,	line 54		+ \$	0.00		
2. Total p	ersonal proper	t y . Add lines 56 t	hrough 61		\$	31,755.00	Copy personal property total	→ + _{\$} 31,755.00
3. Total o	of all property o	n Schedule A/B.	Add line 55 -	+ line 62	••••			\$ 341,755.00

Case 19-17445-JKS Doc 1 Filed 04/11/19 Entered 04/11/19 22:58:29 Desc Main Page 21 of 63 Document Fill in this information to identify your case: Arlene Beckford Debtor 1 First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: District of New Jersey Case number Check if this is an (If known) amended filing Official Form 106C Schedule C: The Property You Claim as Exempt 04/19 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known). For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds-may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount. Part 1: **Identify the Property You Claim as Exempt** 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) ✓ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below. Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Brief 11 USC 522(d)(2) \$ 6.500.00 **Z** s 2,000.00 description: ☐ 100% of fair market value, up to Line from any applicable statutory limit Schedule A/B: Brief Household Goods s 2.930.00 11 USC 522(d)(3) **\$** description: 100% of fair market value, up to Line from any applicable statutory limit Schedule A/B: Brief Electronics s 1.025.00 11 USC 522(d)(3) description: 11 USC 522(d)(5) 100% of fair market value, up to Line from any applicable statutory limit Schedule A/B: 3. Are you claiming a homestead exemption of more than \$170,350? (Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.) **☑** No Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No Yes

Case 19-17445-JKS Doc 1 Filed 04/11/19 Entered 04/11/19 22:58:29 Desc Main Arlene Docunge Official Page 22 of 63 number (if known)

Debtor 1

Middle Name

Last Name

Part 2: **Additional Page**

Brief description Schedule A	on of the property and line /B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description: Line from Schedule A/B:	Clothes and Shoes 11	\$1,000.00	\$ 100% of fair market value, up to any applicable statutory limit	11 USC 522(d)(3)
Brief description: Line from Schedule A/B:	Costume Jewelry 12	\$200.00	\$ \$ 100% of fair market value, up to any applicable statutory limit	11 USC 522(d)(4)
Brief description: Line from Schedule A/B:	Cash on hand	\$100.00	■ \$ ■ 100% of fair market value, up to any applicable statutory limit	11 USC 522(d)(5)
Brief description: Line from Schedule A/B:	Checking Account 17	\$2,000.00	\$ 100% of fair market value, up to any applicable statutory limit	11 USC 522(d)(5)
Brief description: Line from Schedule A/B:	Retirement Account 21	\$18,000.00	\$ 100% of fair market value, up to any applicable statutory limit	11 USC 522(d)(12)
Brief description: Line from Schedule A/B:		\$	\$ \$00% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	\$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B;		\$	\$ 100% of fair market value, up to any applicable statutory limit	
Brief description; Line from Schedule A/B;		\$	\$ \$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	\$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	\$ \$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B;		\$	\$ to any applicable statutory limit	

Case 19-17445-JKS Doc 1 Filed 04/11/19 Entered 04/11/19 22:58:29 Desc Main Document Page 23 of 63

Fill in this information to identify your case:							
Debtor 1	Arlene		Beckford				
•	First Name	Middle Name	Last Name				
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name				
United States I	Bankruptcy Court for the	e: District of New Jerse					
Case number (If known)	- AMPLE						

☐ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below.

for each claim. If more than one creditor had As much as possible, list the claims in alph	nore than one secured claim, list the creditor separately as a particular claim, list the other creditors in Part 2. abetical order according to the creditor's name.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1 The Bank of New York Mellon	Describe the property that secures the claim:	_{\$} 511,075.51	\$_310,000.00	_{\$} 201,075.5
Creditor's Name 101 Barclays St 4-W Number Street	64 Lindsley Avenue, Irvington< NJ			
New York NY 10286 City State ZIP Code	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed	_		
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt	An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)	-		
Date debt was incurred	Last 4 digits of account number			
2.2 CREDIT ACCEPTANCE CORP	Describe the property that secures the claim:	\$5,374.00	\$ 6,500.00	\$
CREDIT ACCEPTANCE CORP Creditor's Name PO Box 5070 Number Street	Describe the property that secures the claim:	\$ 5,374.00	\$ 6,500.00	\$
CREDIT ACCEPTANCE CORP Creditor's Name PO Box 5070	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated		§ 6,500.00	\$
CREDIT ACCEPT ANCE CORP Creditor's Name PO Box 5070 Number Street SOUTHFIELD MI 48086	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed		<u>\$ 6,500.00</u>	\$
CREDIT ACCEPT ANCE CORP Creditor's Name PO Box 5070 Number Street SOUTHFIELD MI 48086 City State ZIP Code	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated		\$ 6,500.00	\$

Case 19-17445-JKS Doc 1 Filed 04/11/19 Entered 04/11/19 22:58:29 Desc Main Document Page 24 of 63

Debtor 1

Arlene First Name

Part 2: List Others to Be Notified for a Debt That You Already Listed

you	ency is trying to collect from you for a deb	t you owe to s le debts that v	someone else, list the cro you listed in Part 1 list th	ebt that you already listed in Part 1. For example, if a collection editor in Part 1, and then list the collection agency here. Similarly, if he additional creditors here. If you do not have additional persons to
2.1	Powers Kirn, LLC	•	•	On which line in Part 1 did you enter the creditor?
	Name			Last 4 digits of account number
	728 Marne Highway, Suite 200			Lust 4 digits of account number
	Number Street			
	Moorestown	NJ	08057	
	City	State	ZIP Code	
	NO OCERNICASSESPRENTENTENT O CESSIFIE CONTRACTOR CONTRA	**************************************	AMA, 4 A Ales les non comme infras caracte despuis de establicate de la commención de la commención de la comme	On which line in Part 1 did you enter the creditor?
	Name			Last 4 digits of account number
	Number Street			
ant:	City	State	ZIP Code	
		77.794.07.02.00	AND THE PROPERTY OF THE PROPER	On which line in Part 1 did you enter the creditor?
	Name			Last 4 digits of account number
	Number Street		100	
		<u> </u>	· · · · · · · · · · · · · · · · · · ·	
	City	State	ZIP Code	
				On which line in Part 1 did you enter the creditor?
	Name	···		Last 4 digits of account number
	Number Street			
	City	State	ZIP Code	
	ARABIAN PRINCES (CORT CORT CORT CORT CORT CORT CORT CORT	Ставия X в 164-1644 А. Стави II в ифо не ув оегрази завосного	KONTOCKATARIONA MATERIARIAN TANIGUETA TO TO TOTAL THE MORE METALANTIA AND AND AND AND ANALYSIS (AND ANALYSIS (AND ANALYSIS ANALYSIS) ANALYSIS (ANALYSIS) ANALYSIS (ANA	On which line in Part 1 did you enter the creditor?
	Name	<u></u>		Last 4 digits of account number
	Number Street			
	City	State	ZIP Code	
	man para dang sa kanananan ang dang dang dang dang dang da	J(a)C	ZIF GOGE	
╝,	Name	-	<u> </u>	On which line in Part 1 did you enter the creditor?
				Last 4 digits of account number
i	Number Street			
-				
	City	State	ZIP Code	

Case 19-17445-JKS Doc 1	Filed 04/11/19	Entered 04/11/19 22:58:29	Desc Main
Fill in this information to identify your case:		of 63	
Debtor 1 Arlene	Beckford		
First Name Middle Name	Last Name		
Debtor 2 (Spouse, if filing) First Name Middle Name	Last Name		
United States Bankruptcy Court for the: District of New J	la-aa.		
office States Ballicupicy Count for the. District of New J	ersey		☐ Check if this is an
Case number (If known)			amended filing
Official Form 106E/F			
Schedule E/F: Creditors V	Who Have Un	secured Claims	12/15
Be as complete and accurate as possible. Use Pai List the other party to any executory contracts or	t 1 for creditors with PRI unexpired leases that col	ORITY claims and Part 2 for creditors v uld result in a claim. Also list executor	vith NONPRIORITY claims.
A/B: Property (Official Form 106A/B) and on Schee	dule G: Executory Contra	cts and Unexpired Leases (Official For	m 106G). Do not include any
creditors with partially secured claims that are list needed, copy the Part you need, fill it out, number	ed in Schedule D: Credit	ors Who Have Claims Secured by Prop	erty. If more space is
any additional pages, write your name and case n	umber (if known).	on the left. Attach the Continuation Fa	Je to this page. On the top of
Part 1: List All of Your PRIORITY Unsecu	rad Claime		
 Do any creditors have priority unsecured claim No. Go to Part 2. 	ns against you?		
Yes.			
List all of your priority unsecured claims. If a control of the control of t	reditor has more than and		onnesetale for analysis - Fac
each claim listed, identify what type of claim it is. I	f a claim has both priority a	and nonpriority amounts, list that claim her	e and show both priority and
nonpriority amounts. As much as possible, list the unsecured claims, fill out the Continuation Page o	claims in alphabetical order	er according to the creditor's name. If you	have more than two priority
(For an explanation of each type of claim, see the			er creditors in Part 3.
to any experience of each type of diality occurs	inopagnona lot tilla totti ill	Total clai	m Priority Nonpriority
		ia de la composición	
2.1	Last 4 digits of accoun	t mumba.	\$ \$
Priority Creditor's Name	· ·		<u> </u>
Number Street	When was the debt inc	urred?	
	As of the date you file,	the claim is: Check all that apply.	
City State ZIP Code	Contingent		
Who incurred the debt? Check one.	Unliquidated		
Debtor 1 only	☐ Disputed		
Debtor 2 only	Type of PRIORITY uns	secured claim:	
 Debtor 1 and Debtor 2 only At least one of the debtors and another 	☐ Domestic support obti		
☐ Check if this claim is for a community debt		er debts you owe the government	
	Claims for death or pe intoxicated	rsonal injury while you were	
ls the claim subject to offset? ☑ No			
Yes	, ,		
2.2	Last 4 digits of account	t number \$	**************************************
Priority Creditor's Name	When was the debt inc		\$\$
Number Street	when was the dept inc		
·		the claim is: Check all that apply.	
	Contingent		
City State ZIP Code	Unliquidated		
Who incurred the debt? Check one. ☐ Debtor 1 only	☐ Disputed		
Debtor 2 only	Type of PRIORITY uns		
Debtor 1 and Debtor 2 only	Domestic support oblig	_	
At least one of the debtors and another		er debts you owe the government	
Check if this claim is for a community debt	Claims for death or pe intoxicated	rsonal injury while you were	
Is the claim subject to offset?			
□ No □ Man	-		

Casiente9-17445-JKS Doc 1 Debtor 1

Filed 26/11/19 Entered 04/11/19 22:58:29 Desc Main Document Page 26 of 63

_			ecured Claims	·			·
3.	Do any creditors have nonpriority un No. You have nothing to report in th Yes		• .				
	List all of your nonpriority unsecured nonpriority unsecured claim, list the cree included in Part 1. If more than one cree claims fill out the Continuation Page of F	ditor separa ditor holds	ately for each claim.	For each claim listed identify who	at type of claim it is. Do not	list cla	time already
	로	ar Ser Li	and the second second	o samon Paraka in 1999) a land Tanàna		Tot	al claim
4.1	LINCOLN TECHNICAL INSTIT	Γ		Last 4 digits of account number	0 0 9 7		E 044 00
	Nonpriority Creditor's Name				11/22/2016	\$	5,014.00
	1777 Sentry Parkway West ST	E 403		when was the debt incurred?	11/22/2010		
	Blue Bell	PA	19422				
	City	State	ZIP Code	As of the date you file, the claim	is: Check all that apply.		
				☐ Contingent			
	Who incurred the debt? Check one.			☐ Unliquidated			
	Debtor 1 only			☐ Disputed			
	Debtor 2 only						
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecu	red claim:		
	At least one of the debtors and another			☐ Student loans			
	Check if this claim is for a communication	nity debt		Obligations arising out of a separ	ation agreement or divorce		
	Is the claim subject to offset?			that you did not report as priority Debts to pension or profit-sharing			
	☑ No			Other. Specify	plans, and other similar debts		
	☐ Yes						
4.2	NI I Ligher Education Chadast	\ ! _ !	- A (I				7,139.34
7.2	NJ Higher Education Student A	Assistant	e Authority	Last 4 digits of account number When was the debt incurred?		\$	7,100.04
	4 Quakerbridge Plaza			when was the dept incurred?			
	Number Street						
	Trenton	NJ	08625	As of the date you file, the claim	is: Check all that apply.		
	City	State	ZIP Code	☐ Contingent			
	Who incurred the debt? Check one.			☐ Unliquidated			
	Debtor 1 only			☐ Disputed			
	Debtor 2 only						
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecu	red claim:		
	At least one of the debtors and another			Student loans			
	Check if this claim is for a communication	ıity debt		Obligations arising out of a separathat you did not report as priority.			
	Is the claim subject to offset?			☐ Debts to pension or profit-sharing			
	☑ No			Other. Specify			
	☐ Yes						
4.3	US DEPT OF EDUCATION/GI	F		Last 4 digits of account number	E	CONTRACTOR OF THE PERSON OF TH	
	Nonpriority Creditor's Name	<u></u>			<u> </u>	\$	31,441.00
	PO Box 7859			When was the debt incurred?	00/20/2014		
	Number Street	100	50704				
	MADISON	WI State	53704 ZIP Code	As of the date you file, the claim	is: Check all that apply.		
	•	Otalo	Zii Gode	Contingent			
	Who incurred the debt? Check one.			☐ Unliquidated			
	Debtor 1 only Debtor 2 only			Disputed			
	Debtor 2 only Debtor 1 and Debtor 2 only						
	☐ At least one of the debtors and another			Type of NONPRIORITY unsecu	red claim:		
	☐ Check if this claim is for a commun	.is., .a		Student loans			
		iity aebt		Obligations arising out of a separa that you did not report as priority			
	is the claim subject to offset?			Debts to pension or profit-sharing			
	✓ No ☐ Yes			Other. Specify			
	₩ 162			· · · · · · · · · · · · · · · · · · ·			

Canada na Canada

Doc 1

Filed 24/11/19 Entered 04/11/19 22:58:29 Desc Main Document Page 27 of 63 number (# known)

Part 2:

BANK OF MISSOURI	e de la companya de		Last 4 digits of account number 0 2 9 8	s 64
Nonpriority Creditor's Name 5109 S BROADBAND LA	NF	·	When was the debt incurred? 04/04/2017	3
lumber Street			As of the data year file the state in the Or all the state in	
SIOUX FALLS	SD	57109	As of the date you file, the claim is: Check all that apply.	
Oity Nho incurred the debt? Check or	State ne.	ZIP Code	☐ Contingent ☐ Unliquidated ☐ Disputed	
Debtor 1 only				
Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
→ Debtor 1 and Debtor 2 only → At least one of the debtors and a	nother		Student loans	
			Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Check if this claim is for a co	mmunity debt		Debts to pension or profit-sharing plans, and other similar debts	
s the claim subject to offset?			Other Specify Credit Card	
☑ No ☑ Yes				
AA ACTION COLLECTIO	N	n erver-erra Amassa 6-00-000-00-000-000-000-000-000-000-000	Last 4 digits of account number 1 7 2 3	s 74
Nonpriority Creditor's Name			When was the debt incurred? 10/02/2018	
517 SOUTH LIVINGSTO	N AVE 2ND	FLOOR	When was the debt incurred? 10/02/2018	
lumber Street _IVINGSTON	NJ	07039	As of the date you file, the claim is: Check all that apply.	
ity	State	ZIP Code	Contingent	
Wha !			☐ Unliquidated	
Vho incurred the debt? Check or	ie.		☐ Disputed	
Debtor 1 only Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			**	
At least one of the debtors and a	nother		Student loansObligations arising out of a separation agreement or divorce that	
Check if this claim is for a co	mmunity deht		you did not report as priority claims	
s the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts	
No			Other. Specify_Collection	
Yes				
NCB MANAGEMENT SEI	RVICES	reserva reserva de la reserva de entre habitado de la composiçõe de la c	Last 4 digits of account number 5 5 5 6	_{\$_} 8,59
onpriority Creditor's Name	V	*10**	When was the debt incurred? 12/16/2016	
ALLIED DR umber Street			Tenen was the dept inchilled:	
TREVOSE	PA	19053	As of the date you file, the claim is: Check all that apply.	
ity	State	ZIP Code	Contingent	
/ho incurred the debt? Check on			☐ Unliquidated	
The incurred the debt? Check on Debtor 1 only	e.		☐ Disputed	
Debtor 1 only Debtor 2 only			Type of NONDRIORITY unsequend claims	
Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
At least one of the debtors and ar	other		Student loansObligations arising out of a separation agreement or divorce that	
Check if this claim is for a co	mmunity debt		you did not report as priority claims	
the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts	
No			☑ Other. Specify <u>Debt Buyer</u>	
Yes				

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Last Name Document Page 28 of 63

Part 2:

Afte	r listing any entries on this page, number the	m beginning with	4.4, followed by 4.5, and so forth.	Total claim
4.7	REMEX INC		Last 4 digits of account number 0 5 2 8	s 433.00
	Nonpriority Creditor's Name 307 WALL ST	· · · · · · · · · · · · · · · · · · ·	When was the debt incurred? 03/16/2018	Ψ
AND	Number Street PRINCETON NJ	08540	As of the date you file, the claim is: Check all that apply.	
migras i algelytaligations you	Who incurred the debt? Check one. Debtor 1 only	ZIP Code	Contingent Unliquidated Disputed	a market and a second a second and a second
	Debtor 2 only Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another		Student loansObligations arising out of a separation agreement or divorce that	4
A valuation and a state of the design of the	 □ Check if this claim is for a community debt Is the claim subject to offset? ☑ No □ Yes 		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical	
4.8	PSE&G		Last 4 digits of account number 4 0 0 7	s 1,849.03
	Nonpriority Creditor's Name	10 1	When was the debt incurred?	ф 1, 0-10.00
A	PO Box 1444 Number Street		•	тели усу-устандария
A A A A A A A A A A A A A A A A A A A	New Brunswick NJ City State	08906 ZIP Code	As of the date you file, the claim is: Check all that apply. Contingent	cocom o comment
	Who incurred the debt? Check one.		Unliquidated Disputed	Action via the state of the sta
	Debtor 1 only Debtor 2 only			Comment of the control of the contro
Standard and the Market	Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim: Student loans	THE PERSON AND ADDRESS OF THE PERSON ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON ADDRE
and a second design of the sec	 At least one of the debtors and another Check if this claim is for a community debt 		Obligations arising out of a separation agreement or divorce that you did not report as priority claims	to topicino management
A A A A A A A A A A A A A A A A A A A	Is the claim subject to offset?		☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify_Utility	or or management
	✓ No ☐ Yes		Other. Specify Others	THE CONTRACT OF THE CONTRACT O
4.9	Credit Control LLC	normanian managaman m	Last 4 digits of account number 0 0 1	_{\$} 667.43
	Nonpriority Creditor's Name	. .	When was the debt incurred?	Alteriory of Relative
	PO Box 187 Number Street			
	Hazelwood MO City State	63042 ZIP Code	As of the date you file, the claim is: Check all that apply. Contingent	
	Who incurred the debt? Check one		☐ Unliquidated	
	Debtor 1 only		☐ Disputed	
	☐ Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only At least one of the debtors and another		☐ Student loans	-
	Check if this claim is for a community debt		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	Is the claim subject to offset?		☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Collection Account	
	☑ No □ Yes			

Са**жа**ећ **2**-17445-JKS

Description Descri

Saint Barnabas Medica	Center		Last 4 digits of account number 0 9 1 5	\$_46,5	81
PO Box 29960			When was the debt incurred?		
Number Street New York	NY	10087	As of the date you file, the claim is: Check all that apply.		
Who incurred the debt? Check Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and Check if this claim is for a Is the claim subject to offset? Yo Yes	d another community debt	ZIP Code	 □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Medical 		
Credit Repair USA	entral de la companya	Microsoft and Communication an	Last 4 digits of account number 2 0 6 0	s <u>5(</u>	<u> </u>
222 Broadway, Suite 24	26		When was the debt incurred?		
Number Street New York	NY	10038	As of the date you file, the claim is: Check all that apply.		
City	State	ZIP Code	□ Contingent		
Who incurred the debt? Check	one		Unliquidated		
Debtor 1 only	one.		☐ Disputed		
Debtor 2 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only			Student loans		
At least one of the debtors and	l another		 Student loans Obligations arising out of a separation agreement or divorce that 		
Check if this claim is for a	community debt		you did not report as priority claims		
s the claim subject to offset?			☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Credit Repair		
☑ Yes			other. Specify Credit Repair		
NJ EzPass			Last 4 digits of account number 9 3 9 0	\$ 5	5
Nonpriority Creditor's Name 375 McCarter Hwy			When was the debt incurred?		
Number Street Newark	NJ	07114	As of the date you file, the claim is: Check all that apply.		
City	State	ZIP Code	Contingent		
Who incurred the debt? Check	000		Unliquidated		
Debtor 1 only	one.		☐ Disputed		
Debtor 2 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only			Student loans		
At least one of the debtors and	another		Student loansObligations arising out of a separation agreement or divorce that		
☐ Check if this claim is for a	community debt		you did not report as priority claims		
s the claim subject to offset?			 □ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify TOIIS 		
⊿ No			— Onici. Opedity 10110		

L9 Entered 04/11/19 22:58:29 Page 30 of 63 Caseelng-17445-JKS Doge Ckfor Filed 04/11/19 Desc Main Debtor 1 Last Name Document Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Total claim

<u> </u>					
44	IRMS			Last 4 digits of account number 3 8 1 6	\$ 2, 4 00.00
2	Nonpriority Creditor's Name 1201 Sussex Turnpike			When was the debt incurred?	8
	Number Street Randolph	NJ	07869	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	Contingent	
	Who incurred the debt? Check one.			Unliquidated	
	Debtor 1 only			☐ Disputed	
	Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only			☐ Student loans	1
	At least one of the debtors and another			Obligations arising out of a separation agreement or divorce that	11
	☐ Check if this claim is for a commu	nitv debt		you did not report as priority claims	4
	Is the claim subject to offset?	•		Debts to pension or profit-sharing plans, and other similar debts	
	No No			✓ Other, Specify Collection	90
	Yes				
44	мента се в в тобото поточно по также поточно поточно поточно поточно поточно по поточно поточно поточно поточно	ж. Корина пат ерия поема, постоя операция			
	Union County College Nonpriority Creditor's Name			Last 4 digits of account number 9 6 2 0	\$_1,006.00
	1033 Springfield Ave			When was the debt incurred?	* (
	Cranford	NJ	07016	As of the date you file, the claim is: Check all that apply.	A Common of Assessment of Asse
	City	State	ZIP Code	Contingent	TOTAL PARTY OF THE
	Who incurred the debt? Check one.			☐ Unliquidated ☐ Disputed	ange yer ger ge
	Debtor 1 only			☐ Disputed	
	Debtor 2 only			Type of NONPRIORITY unsecured claim:	American Control
	Debtor 1 and Debtor 2 only			Student loans	
	At least one of the debtors and another			Obligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a commu	nity debt		you did not report as priority claims	A1100 100 110 110 110 110 110 110 110 11
	Is the claim subject to offset?	•		☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify College Course	to the company of the same
	₩ No			Other: Specify College Course	WANTED OF
	Yes				
44		i 2000.00 000000000000000 0000000000000000			s 1,575.56
	Overlook Medical Center Nonpriority Creditor's Name			Last 4 digits of account number <u>5</u> <u>1</u> <u>4</u> <u>9</u>	\$
	99 Beavoir Ave			When was the debt incurred?	And a state of the
	Number Street Summit	NJ	07901	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	Contingent	
	Who incurred the debt? Check one.			Unliquidated	
	Debtor 1 only			☐ Disputed	
	Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only				
	☐ At least one of the debtors and another			☐ Student loans ☐ Obligations arising out of a senaration agreement or divorce that	and the state of t
	☐ Check if this claim is for a commu	nity dobt		Obligations arising out of a separation agreement or divorce that you did not report as priority claims	Per Chy ling reques
		inty uebt		Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset? No			☑ Other, Specify <u>Medical</u>	
	¥⊈ No □ ∨as				

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Last Name Document

fter listing any e	ntries on this page, n	umber the	em beginning with	h 4.4, followed by 4.5, and so forth.	To	tal claim
.	ur en la ura de la Maria. La companya de la c				101610	
- First Acces				Last 4 digits of account number 8 3 8 4	\$	643.0
Nonpriority Credito				— When was the debt incurred?	·	
PO Box 52	20 reet			— — — — — — — — — — — — — — — — — — —		
Sious Falls		SD	57117	As of the date you file, the claim is: Check all that apply.		
City	· =··	State	ZIP Code	Contingent		
Who incurred	the debt? Check one.			Unliquidated		
Debtor 1 onl				☐ Disputed		
Debtor 2 onl				Type of NONPRIORITY unsecured claim:		
Debtor 1 and						
	of the debtors and another	r		Student loans		
☐ Check if th	is claim is for a commu	inity dahe		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 		
		mily uebt		Debts to pension or profit-sharing plans, and other similar debts		
is the claim su ✓ No	bject to offset?			Other. Specify Credit Card		
¥Zi No □ Yes						
Mary and a second control of the second cont		eronomone handraine secumen				
SBMC Ond	ology			Last 4 digits of account number	\$	287.17
Nonpriority Credito	's Name					
PO Box 17				When was the debt incurred?		
Number St Whitehouse	est Sation	NJ	08889	As of the date you file, the claim is: Check all that apply.		
City		State	ZIP Code	Contingent		
Who incurred	the debt? Check one.			Unliquidated		
Debtor 1 on				☐ Disputed		
Debtor 2 onl				Type of NONPRIORITY unsecured claim:		
Debtor 1 and	Debtor 2 only			Student loans		
At least one	of the debtors and another	=		 Obligations arising out of a separation agreement or divorce that 		
☐ Check if th	is claim is for a commu	nity debt		you did not report as priority claims		
	bject to offset?			Debts to pension or profit-sharing plans, and other similar debts		
✓ No	bject to onset?			Other. Specify Medical		
Yes						
		iakida (kumusuu anamanna anam			\$	348.51
Geico Indei Nonpriority Creditor	nnity Company			Last 4 digits of account number		
PO Box 607				When was the debt incurred?		
Number Str Norwood	eet	MA	02062	As of the date you file, the claim is: Check all that apply.		
City		State	ZIP Code	Contingent		
Who incurred	the debt? Check one.			Unliquidated		
Debtor 1 only				☐ Disputed		
Debtor 2 only				Type of NONPRIORITY unsecured claim:		
Debtor 1 and						
	of the debtors and another			Student loans		

☑ No ☐ Yes

 $f \square$ Check if this claim is for a community debt

Is the claim subject to offset?

Obligations arising out of a separation agreement or divorce that

 $\hfill \Box$ Debts to pension or profit-sharing plans, and other similar debts

you did not report as priority claims

Other. Specify Insurance

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Last Name Document Page 32 of 63 number (if known)

Comcast Cable Nonpriority Creditor's Name			Last 4 digits of account number 7 6 9 5	s 2			
•			When was the debt incurred?				
PO Box 118288							
Number Street Carrollton	TX	75011	As of the date you file, the claim is: Check all that apply.				
City Who incurred the debt? Check one. Debtor 1 only	State	ZIP Code	☐ Contingent ☐ Unliquidated ☐ Disputed				
Debtor 2 only			Type of NONPRIORITY unsecured claim:				
 Debtor 1 and Debtor 2 only At least one of the debtors and anothe 	.r		Student loans				
☐ Check if this claim is for a commuls the claim subject to offset? ☑ No ☐ Yes			 □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Cable 				
Atlantic Medical Group Nonpriority Creditor's Name	nnann na sanann na s	вижение от нето муниципунскую располькой под полькой почен в почен почен почен почен почен почен почен почен по	Last 4 digits of account number 1 2 0 4	\$			
3075 E Imperial Hwy, Suite 2	00		When was the debt incurred?				
Number Street			As of the data you file the eleteric Co. 1. 1. 1. 1.				
Brea	CA	92821	As of the date you file, the claim is: Check all that apply.				
City	State	ZIP Code	☐ Contingent				
Who incurred the debt? Check one.			☐ Unliquidated ☐ Disputed				
Debtor 1 only			- Disputed				
Debtor 2 only			Type of NONPRIORITY unsecured claim:				
Debtor 1 and Debtor 2 only			☐ Student loans				
At least one of the debtors and another			Obligations arising out of a separation agreement or divorce that				
Check if this claim is for a communication	ınity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts				
Is the claim subject to offset?			Other. Specify Medical				
☑ No □ Yes							
			Last 4 digits of account number	\$			
Nonpriority Creditor's Name			When was the debt incurred?				
Number Street			 As of the date you file, the claim is: Check all that apply. 				
City	State	ZIP Code	☐ Contingent				
Who incurred the debt? Check one.			Unliquidated				
Debtor 1 only			☐ Disputed				
Debtor 2 only			Type of NONPRIORITY unsecured claim:				
Debtor 1 and Debtor 2 only	,		Student loans				
lacksquare At least one of the debtors and another	г		Obligations arising out of a separation agreement or divorce that				
☐ Check if this claim is for a commu	inity debt		you did not report as priority claims				
	-		☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify				
Is the claim subject to offset?			L. Urber Specify				

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Part 3: List Others to Be Notified About a Debt That You Already Listed

The Law Office of Richa	ard W. Krie	g, LLC	On which entry in Part 1 or Part 2 did you list the original creditor?					
17 Prospect St			Line 4.2 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims					
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims					
			Fait 2. Cleditors with Nonphority Onsecured Claim					
Morristown	NJ	07960	Last 4 digits of account number					
City	01-1-	ZIP Code						
Milton Patterson	**-		On which entry in Part 1 or Part 2 did you list the original creditor?					
varne			Line 4.2 of (Check and) D. Bart to Condition with Direct Line 1011					
Number Street			Line 4.2 of (Check one): Part 1: Creditors with Priority Unsecured Claims					
			Part 2: Creditors with Nonpriority Unsecured Claims					
City	State	ZIP Code	Last 4 digits of account number					
Forster, Garbus & Garb	us		On which entry in Part 1 or Part 2 did you list the original creditor?					
7 Banta Place			Line 4.6 of (Check one): Part 1: Creditors with Priority Unsecured Claims					
Number Street			Part 2: Creditors with Nonpriority Unsecured					
-,			Claims					
Hackensack_	NJ State	07601 ZIP Code	Last 4 digits of account number					
Action Collection			On which entry in Part 1 or Part 2 did you list the original creditor?					
Name 29 Columbia Tpke, Ste	າດາ		Line 4.5 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims					
Number Street	303		Part 2: Creditors with Nonpriority Unsecured					
			Claims					
Florham Park	NJ State	07932 ZIP Code	Last 4 digits of account number					
Forster, Garbus & Garbı	us Us	C ************************************	On which entry in Part 1 or Part 2 did you list the original creditor?					
Name			on which only in rait ror rait 2 did you list the original creditor?					
7 Banta Place			Line 4.6 of (Check one): Part 1: Creditors with Priority Unsecured Claims					
Number Street			Part 2: Creditors with Nonpriority Unsecured					
	.		Claims					
Hackensack _{Sity}	NJ State	07601 ZIP Code	Last 4 digits of account number					
Officer Zachary Romand		ZIF COGE	On which entry in Part 1 or Part 2 did you list the original creditor?					
lame			·					
PO Box 565			Line 4.6 of (Check one): Part 1: Creditors with Priority Unsecured Claims					
Ouest			Part 2: Creditors with Nonpriority Unsecured Claims					
Whitehouse Station	N. f	00000						
ity station	NJ State	08880 ZIP Code	Last 4 digits of account number					
			On which entry in Part 1 or Part 2 did you list the original creditor?					
lame								
lumber Street	* ***		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims					
			Part 2: Creditors with Nonpriority Unsecured Claims					
		·	Ciaino					
ity	State	ZIP Code	Last 4 digits of account number					

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Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim	
Total claims	6a. D	Domestic support obligations	6 a .	\$	0.00
from Part 1		axes and certain other debts you owe the government	6 b .	\$	0.00
records made a condition of many of	6c. C	Claims for death or personal injury while you were ntoxicated	6c.	\$	0.00
1 11 11 11 11 11 11 11 11 11 11 11 11 1		Other. Add all other priority unsecured claims. Write that amount here.	6d.	+ \$	0.00
	6e. T	otal. Add lines 6a through 6d.	6e.	\$	0.00
				Total claim	oral areas Oral oral Borotto area
Total claims	6f. S	Student loans	6f.	Total claim	43,594.34
Total claims from Part 2	6g. O	Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6f. 6g.	Total claim \$ \$	43,594.34 0.00
	6g. C o c	Obligations arising out of a separation agreement or divorce that you did not report as priority		Total claim \$ \$ \$	
	6g. O c 6h. D s	Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other	6g.	** ** **	0.00

Case 19-17445-JKS Doc 1 Filed 04/11/19 Entered 04/11/19 22:58:29 Desc Main Document Page 35 of 63

				Doc	<u>cume</u> nt	Page	35 of 6	3				
Filli	in this in	nformation to	identify your ca	ise;								
Debt	or	Arlene			Beckford							
		First Name	Middle	Name	Last Name	,,,,,	_					
Debt (Spou	or Z use If filing)	First Name	Middle	Name	Last Name		-					
Unite	ed States I	Bankruptcy Co	urt for the: District	of New Jersey								
	number				_						-	
(lf kn	own)											if this is an ed filing
Offi	cial F	Form 10	6G									
Sc	hedi	ule G:	 Executo	rv Cont	racts a	nd U	nexn	ired I	ease	8		12/15
inforn additi	nation. I onal paç	f more space ges, write yo	rate as possible. e is needed, copy ur name and cas	/ the additional se number (if ki	l page, fill it o nown).	ing togeth ut, numbe	er, both a r the entr	re equally ies, and at	responsible ach it to thi	o for supply is page. Or	ying correc 1 the top of	t any
G	🛮 No. C	heck this box	cutory contracts and file this form information belo	with the court w	ith your other	schedules es are liste	. You have	nothing els	se to report o	on this form). 06A/B).	
2. L	ist sepa	rately each ¡ rent, vehick	person or compa e lease, cell pho	ny with whom	you have the	contract o	or lease. T	hen state v	what each c	ontract or	lease is for	(for ntracts and
F	erson o	r company v	vith whom you h	ave the contra	ct or lease		State	what the c	ontract or I	ease is for		
2.1							in a wive .			1		
·!	Name		***	· ·								
_	Number	Street		 -								
_		Olicei										
(City	#\$####################################	State	ZIP Code	manyolost som knom tött utti dörðindi	The state of the s	TO THE RESIDENCE OF THE PARTY O		TO THE WORLD WITH THE PARTY OF	en anderstand and an experience of the second	SOME AND LANGUAGE SERVICES OF THE SERVICES OF	tildelikoldotinaksi oMpi sessoosesesso paa
2.2												
١	Name		**-									
Ī	Number	Street	".									
7	City		State	ZIP Code								
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<u> </u>	Number	Street		<u></u>								
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7	City	·	State	ZIP Code								
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, n	THE POPULATION OF THE POPULATI	Street										

State

ZIP Code

City

Case 19-17445-JKS Doc 1 Filed 04/11/19 Entered 04/11/19 22:58:29 Desc Main Fill in this information to identify your case: Arlene Beckford Debtor 1 Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: District of New Jersey Case number (If known) ☐ Check if this is an amended filing Official Form 106H Schedule H: Your Codebtors 12/15 Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question. 1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.) □ No ☑ Yes 2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) No. Go to line 3. Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? Yes. In which community state or territory did you live? ____ _____. Fill in the name and current address of that person. Name of your spouse, former spouse, or legal equivalent Number Street City ZIP Code 3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2. Column 1: Your codebtor Column 2: The creditor to whom you owe the debt Check all schedules that apply: 3.1 Milton Patterson Schedule D, line _ Schedule E/F, line 4.2 Number ☐ Schedule G, line City 3.2 Schedule D, line ___ Name Schedule E/F, line ____ Number Schedule G, line ____ ZIP Code 3.3 Schedule D, line Name Schedule E/F, line

Number

Street

ZIP Code

Schedule G, line _

Case 19-17445-JKS Doc 1 Filed 04/11/19 Entered 04/11/19 22:58:29 Desc Main Document Page 37 of 63

Fill in this inf	ormation to identify	your case:					
Debtor 1	Arlene	T E	Beckford				
Debtor 2	First Name	Middle Name	Last Name				
(Spouse, if filing)		Middle Name	Last Name				
	ankruptcy Court for the: I	District of New Jersey			01 1 16 11		
Case number (If known)					Check if th	ils is: ended filing	
					☐ A supp	lement showing post	etition chapter 13
Official Fo	rm 106I					e as of the following d	ate:
		ır Income			MM / DI	D/YYYY	12/15
Be as complet supplying corr If you are sepa separate shee	e and accurate as po ect information. If your trated and your spou	ssible. If two married pe ou are married and not fil se is not filing with you, top of any additional pa	ling jointly, and you do not include info	ur spouse is ormation abo	living with yout you	ou, include information use. If more space is n	esponsible for about your spouse.
Fill in your information			Debtor 1			Debtor 2 or non-fil	ing spouse
If you have attach a sej information employers.	more than one job, parate page with about additional	Employment status	☑ Employed ☐ Not employe	ed		☐ Employed ☐ Not employed	
self-employ	t-time, seasonal, or ed work.	0	Nursing Assis	tant			
Occupation or homema	may include student ker, if it applies.	Occupation	Truising Maaia	ntearnt		·	
		Employer's name	AHS Hospital	Corp.			
		Employer's address	475 South St Number Street			Number Street	· • · • · · · · · · · · · · · · · · · ·

			Morristown	NJ State ZIP (07962 Code	City	State ZIP Code
-		How long employed the	ere? <u>15</u>			15	
Part 2:	Sive Details About	Monthly Income					
		the date you file this for	m. If you have nothin	ng to report fo	or anv line, wri	ite \$0 in the space. Inclu	de vour non-filina
spouse unle	ess you are separated ur non-filing spouse ha	ive more than one employe tach a separate sheet to the	er, combine the infor	-	•	•	
below. II yo	u need more space, a	tacii a separate srieet to ti	ilis tottii.	For	Debtor 1	For Debtor 2 or non-filing spouse	
		ary, and commissions (be calculate what the monthly		2. \$ <u>3</u>	,346.07	\$	
3. Estimate a	and list monthly over	time pay.		3. +\$		+ \$	
4. Calculate	gross income. Add lii	ne 2 + line 3.		4. \$ 3	,346.07	\$	

Debtor 1

Case 19-17445-JKS Doc 1 Filed 04/11/19 Entered 04/11/19 22:58:29 Desc Main Page 38 of 63 Case number (if known) First Name Middle Name For Debtor 1 For Debtor 2 or non-filing spouse Copy line 4 here.....→ 4 3,346.07 5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5a. 540.84 5b. Mandatory contributions for retirement plans 5b. 5c. Voluntary contributions for retirement plans 108.33 5c. 5d. Required repayments of retirement fund loans 96.81 5d. 5e. Insurance 208.24 5e. 5f. Domestic support obligations 5f. 5g. Union dues 5g. 5h. Other deductions. Specify: 5h. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h. 954.22 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 2,391.85 7. 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8a. 8b. Interest and dividends 86 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. 8d. Unemployment compensation 8d 8e. Social Security 8e 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. 8g. Pension or retirement income 8g. 8h. Other monthly income. Specify: 8h. 9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. 0.00 10. Calculate monthly income. Add line 7 + line 9. 2,391.85 2,391.85 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. + 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. 2,391.85 Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies 12. Combined monthly income

13. Do you expect an increase or decrease within the year after you file this form?

■ No.

Yes. Explain:

I might get a raise

Case 19-17445-JKS Doc 1 Filed 04/11/19 Entered 04/11/19 22:58:29 Desc Main Document Page 39 of 63

Fill in this in	formation to identify y	our case:				
	Arlene	Beckfor	rd.			
Debtor 1	First Name	Middle Name Last Name	<u>u</u>	Check if this is:		
Debtor 2 (Spouse, if filing)	First Name	Middle Name Last Name		☐ An amended	filing	
United States I	Bankruptcy Court for the: Di				t showing postpof the following	petition chapter 13 date:
Case number (If known)				MM / DD / YYY	Y	
Official F	Form 106J					
Sched	lule J: You	ır Expenses				12/15
information. If	te and accurate as pos f more space is needed swer every question.	sible. If two married people are fi f, attach another sheet to this for	ling together, both a	are equally respons additional pages,	sible for supply write your nam	ing correct e and case number
Part 1:	Describe Your Hous	ehold				
1. Is this a joir	nt case?					
☑ No. Go ☐ Yes. Do	to line 2. es Debtor 2 live in a se	parate household?				
		Official Form 106J-2, Expenses for	Separate Household	of Debtor 2.		
2. Do you hav	e dependents?	□ No	D			
Do not list D Debtor 2.	ebtor 1 and	Yes. Fill out this information for each dependent			Dependent's age	Does dependent live with you?
Do not state names.	the dependents'		Son		18	☐ No ☑ Yes
marrioo.						□ No
						☐ Yes
					<u></u>	□ No
						Yes
				 .		☐ No ☐ Yes
						☐ No
						Yes
expenses o	penses include f people other than d your dependents?	☑ No □ Yes				
A THE PERSON NAMED AND ADDRESS OF THE PERSON NAMED AND ADDRESS	alia adini Chi ilmadini mandaliki di mandaliki dan Araba da mandaliki mandal	I N 666 MV officiological accommon as an invariant ratio as as as as as as as as as as as as a solution of accommon		MARKAN (AMARINGALANIANIANIANIANIANIANIANIANIANIANIANIANIA	n Annum Musum (Annum Annum (Annum Annum	T POPULATION TO THE POPULATION OF THE POPULATION
<u>. </u>		g Monthly Expenses				
		ankruptcy filing date unless you ruptcy is filed. If this is a supplen	_		-	•
applicable dat		ruptoy to mod. If this is a supplem	ierrai <i>Senedale</i> V, C	HECK THE BOX AT THE	s top of the form	t and mi m die
Include expen	ses paid for with non-	cash government assistance if yo	u know the value of	:	5 365	··.
		t on Schedule I: Your Income (Of			Your expe	nses
	or home ownership ex r the ground or lot.	penses for your residence. Includ	e first mortgage payn	nents and 4.	\$	
If not inclu	ded in line 4:					
4a. Real e	estate taxes			4a.	\$	
4b. Prope	erty, homeowner's, or rer	nter's insurance		4b.	\$	
4c. Home	maintenance, repair, ar	nd upkeep expenses		4c.	\$	
4d. Home	owner's association or c	condominium dues		4d.	\$	

Case 19-17445-JKS Doc 1 Filed 04/11/19 Entered 04/11/19 22:58:29 Desc Main Document Page 40 of 63

Debtor 1

Arlene First Name

Middle Name

Beckford

Case number (if known)

Your expenses 5. Additional mortgage payments for your residence, such as home equity loans Utilities: Electricity, heat, natural gas 380.00 6a. 6a. 6b. Water, sewer, garbage collection 180.00 6b. Telephone, cell phone, Internet, satellite, and cable services 6c. 445.00 6c. Other. Specify: ADT Security 30.00 6d. 300.00 7. Food and housekeeping supplies 7. Childcare and children's education costs 8. 20.00 Clothing, laundry, and dry cleaning 9. 10. Personal care products and services 100.00 10. Medical and dental expenses 11. 12. Transportation. Include gas, maintenance, bus or train fare. 160.00 Do not include car payments. 12. Entertainment, clubs, recreation, newspapers, magazines, and books 13. Charitable contributions and religious donations 14. 15. Insurance, Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a. 15b. Health insurance 15b. 314.00 15c. Vehicle insurance 15c. 15d. Other insurance. Specify:___ 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. 17. Installment or lease payments: 412.00 17a. Car payments for Vehicle 1 17a. 17b. Car payments for Vehicle 2 17c. Other. Specify: Student Loans 44.81 17d. Other. Specify: 17d. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. Other payments you make to support others who do not live with you. Specify:_ Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. 20b. Real estate taxes 20b 20c. Property, homeowner's, or renter's insurance 20c 20d. Maintenance, repair, and upkeep expenses 20d. 20e. Homeowner's association or condominium dues 20e.

Entered 04/11/19 22:58:29 Case 19-17445-JKS Doc 1 Filed 04/11/19 Page 41 of 63 Document Arlene **Beckford** Debtor 1 Case number (if know) Middle Name Other, Specify: 21. Calculate your monthly expenses. 22a. Add lines 4 through 21. 2,385.81 22a. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 0.00 22b. 22c. Add line 22a and 22b. The result is your monthly expenses. 22¢. 2,385.81 23. Calculate your monthly net income. 2,391.85 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. 23b. Copy your monthly expenses from line 22c above. 23b. 2,385.81 23c. Subtract your monthly expenses from your monthly income. 6.04 The result is your monthly net income. 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? Mo. ☐ Yes. Explain here:

Case 19-17445-JKS Doc 1 Filed 04/11/19 Entered 04/11/19 22:58:29 Desc Main Document Page 42 of 63

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status? Married ☑ Not married 2. During the last 3 years, have you lived anywhere other than where you live now? **⊠** No Yes. List all of the places you lived in the last 3 years. Do not include where you live now. **Dates Debtor 1 Dates Debtor 2** lived there lived there Same as Debtor 1 Same as Debtor 1 From Number City State ZIP Code City State ZIP Code Same as Debtor 1 Same as Debtor 1 Number Τo State ZIP Code ZIP Code 3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) **☑** No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

Explain the Sources of Your Income

Case 19-17445-JKS Doc 1 Filed 04/11/19 Entered 04/11/19 22:58:29 Desc Main Document Page 43 of 63

ebtor 1		Beckford st Name	Case nu	smber (if known)	
Fi	id you have any income from employme Il in the total amount of income you receive you are filing a joint case and you have inc	ed from all jobs and all busi	nesses, including part-ti	me activities.	ndar years?
	No Yes. Fill in the details.				
		Debtor 1	- Land P. S. Sandan, Gr	Debtor 2	r († 1901) kleinis de Europa
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	From January 1 of current year until the date you filed for bankruptcy:	✓ Wages, commissions, bonuses, tips✓ Operating a business	\$11,131.76	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$
	For last calendar year: (January 1 to December 31,2018	✓ Wages, commissions, bonuses, tips ✓ Operating a business	\$ 36,164.00	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$
	For the calendar year before that:	✓ Wages, commissions, bonuses, tips	s 28,746.00	☐ Wages, commissions, bonuses, tips	PAPER TRABAS VI A SIGNA AND AND AND AND AND AND AND AND AND A
	(January 1 to December 31, 2017 YYYY	Operating a business	-	Operating a business	·
un ga Lis	clude income regardless of whether that in nemployment, and other public benefit pays ambling and lottery winnings. If you are filing st each source and the gross income from No No Yes. Fill in the details.	ments; pensions; rental inco og a joint case and you have	ome; interest; dividends; e income that you receiv	money collected from laws ed together, list it only once	uits; royalties; and
		Debtor 1 Talente 1	古 學學即為更多 學 會	Debtor 2	LA STATE
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
	From January 1 of current year until		\$		\$
	the date you filed for bankruptcy:		\$ \$		\$
	The last and a last a l	A CONTRACTOR OF THE CONTRACTOR	4.		
	For last calendar year: (January 1 to December 31,2018)		\$		\$ \$
	TYYY	ann - 1881 1835 - S. D.Y. Serve vann vern anner en ander Arburk N.Y. Presentativ en van	\$	VITTINAMA I MOON AMEET VAN WAS ON SOUTH STEELS STEELS SEELS	\$
	For the calendar year before that:		•		¢
	(January 1 to December 31,2017)		\$.,	*

Case 19-17445-JKS Doc 1 Filed 04/11/19 Entered 04/11/19 22:58:29 Desc Main Document Page 44 of 63

Debtor 1

Arlene First Name

Middle Name

Last Name

Beckford

Case number (if known)

Part 3:	List Certain Payments You Made Before	e You Filed f	or Bank	ruptcy			
3. Are eitl	ner Debtor 1's or Debtor 2's debts primarily co	onsumer debts	?				
☐ No.	Neither Debtor 1 nor Debtor 2 has primarily "incurred by an individual primarily for a person	consumer deb al. family, or ho	ts. Const	umer debts are	defined i	n 11 U.S.C. § 101(8	3) as
	During the 90 days before you filed for bankrup	•	-	•	5,825* or	more?	
	☐ No. Go to line 7.						
	Yes. List below each creditor to whom you total amount you paid that creditor. Do	paid a total of \$	6,825* or ments fo	more in one or	more pa	yments and the	
	child support and alimony. Also, do no	t include payme	ents to an	attorney for thi	s bankru	ptcy cas e .	
	* Subject to adjustment on 4/01/22 and every 3	years after that	for case	s filed on or afte	er the dat	te of adjustment.	
⊠ Yes	s. Debtor 1 or Debtor 2 or both have primarily	consumer deb	ts.				
	During the 90 days before you filed for bankrup	tcy, did you pay	any cred	ditor a total of \$6	800 or m	ore?	
	☐ No. Go to line 7.						
	Yes. List below each creditor to whom you perception. Do not include payments for alimony. Also, do not include payment	domestic suppo s to an attorney Dates of	rt obligati for this b	ions, such as ch	ild suppo	you paid that ort and nt you still owe	Was this payment for
		payment	Highel				
	CREDIT ACCEPTANCE COR Creditor's Name		\$	1,235.00	\$	5,375.00	☐ Mortgage
	PO Box 5070						☑ Car
	Number Street						Credit card
							Loan repayment
	SOUTHFIELD MI 48086						Suppliers or vendors
							_
	City State ZIP Code						Other
	City State ZIP Code	Post of the State	The state of the said of	n open og Byrner og vilsten fran er finsk er døyer ske med desse døy	**************************************	rappendens, zanden beragezar der sekstetastagsastasta	☐ Other
	City State ZIP Code	front i i safri afrikafi miliri ki i makusaki m	\$	t wire by the wire children for a final of by a come decide decide dec	\$	тумпана Аналогандаўнан Насаў Перуі Паў.	A CONTROL OF THE STATE OF THE S
	City State ZIP Code Creditor's Name	Provide a subdivida Prima Prim	\$	t was to the real to the first of the section to th	\$	cyalithing fulfilled things for the state (Alberta).	☐ Mortgage
	Creditor's Name		\$	remove the measurement of the section of the sectio	\$	e annen e entre Magezia de l'estitu e A llando	☐ Mortgage
		Annae i saan aa aa ah	\$		\$	e galadina e e e e e e e e e e e e e e e e e e e	☐ Mortgage ☐ Car ☐ Credit card
	Creditor's Name	finate i vatura tita e finate in	\$		\$	e annones customistante per est	☐ Mortgage ☐ Car ☐ Credit card ☐ Loan repayment
	Creditor's Name Number Street	AND TO THE REAL PROPERTY OF THE PROPERTY OF TH	\$		\$	e ganning e entire e entire e entre e	☐ Mortgage ☐ Car ☐ Credit card ☐ Loan repayment ☐ Suppliers or vendors
	Creditor's Name	AND THE STREET STREET,	\$		\$	n annones ennouvelegeza no resperit se partitude	☐ Mortgage ☐ Car ☐ Credit card ☐ Loan repayment
	Creditor's Name Number Street	79077 5750 AV 104 AV			madili An antaron a a consisso sono		Mortgage Car Credit card Loan repayment Suppliers or vendors Other
	Creditor's Name Number Street		\$		\$		☐ Mortgage ☐ Car ☐ Credit card ☐ Loan repayment ☐ Suppliers or vendors ☐ Other ☐ Mortgage
	Creditor's Name Number Street City State ZIP Code				madili An antaron a a consisso sono		Mortgage Car Credit card Loan repayment Suppliers or vendors Other Mortgage Car
	Creditor's Name Number Street City State ZIP Code				madili An antaron a a consisso sono		Mortgage Car Credit card Loan repayment Suppliers or vendors Other Mortgage Car Credit card
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Case 19-17445-JKS Doc 1 Filed 04/11/19 Entered 04/11/19 22:58:29 Desc Main Document Page 45 of 63

	Arlene		יט	ocument	Page 45 of	03	
г 1	First Name	Middle Name	Last Name	Beckford	(Case number (Ir known)	
<i>Inside</i> corpo ageni	ers include you prations of whic t, including one	r relatives; any ; ch you are an of	general partners; ficer, director, pers	relatives of any g son in control, or	eneral partners; pa owner of 20% or m	artnerships of which	who was an insider? ch you are a general partner; g securities; and any managing r domestic support obligations,
ZÍ N	lo						
Y	es. List all pay	ments to an insi	der.	garanta da salah sa		de le destruir de la companie	er en
				Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	Insider's Name				\$	\$	TO 12
							• Parameter of the Control of the Co
	Number Street		#4.				A PARAMETER TO THE PARA
		. =					
	City	S	tate ZIP Code		3-minor conductor discount		
					\$	\$	
	Insider's Name						
	Number Street						
		<u></u>	<u> </u>				
	City	S	tate ZIP Code	-			40 MARIA A A A A A A A A A A A A A A A A A A
an in: Includ	sider? de payments or o		eed or cosigned b		yments or transfo Total amount paid	er any property o Amount you still owe	n account of a debt that benefited Reason for this payment Include creditor's name
					\$	\$	
	Insider's Name				·	₹	
i	Number Street	 .					:
-	City		oto ZID Code				
,A. 996.	City	SI	ate ZIP Code	7755 1 V (N. 1776 1 276 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	UNAShamakamara na na napapa ya ya ya 13,550 Na 255	COMMISSION FOR STORY OF STORY	
4.00	City	SI	ate ZIP Code	111 (O C C I O C C I O C C I O C C I O C C I O	\$	\$	

Number Street

ZIP Code

Case 19-17445-JKS Doc 1 Filed 04/11/19 Entered 04/11/19 22:58:29 Desc Main Document Page 46 of 63

\Box	Δh	to	•	1

	2 ood. none	. ago 10 0. 00
Arlene	Beckford	Case number (# known)
Clean Nicesco	Berdella Blanca	- Let (William)

nt all such matters, including personal injund d contract disputes.	tcy, were ; y cases, sr	you a party in any la mall claims actions, di	wsuit, court action, or ivorces, collection suits,	administrative proceeding paternity actions, support o	ງ? r custody modificatio
No					
Yes. Fill in the details.					
	Nature o	of the case	Court or agency		Status of the case
Case title NCB Management	Debt C	Collection	Essex Specia	al Civil Part	☐ Pending
Services Inc. v. Beckford	-		465 Dr. M. L.	King Jr. Blvd, Rm 20	On appeal Concluded
Case number ESX-DC-14083-18	-		Newark	NJ 07102	Concluded
A W. A. W. A			City	State ZIP Code	rk - 114 % karanan ang arang ara
Case title			Court Name		Pending
	•		Number Street		On appeal Concluded
Case number	namanan and var				
			City	State ZIP Code	
No. Go to line 11. Yes. Fill in the information below.		Describe the propert		er i ferste til faktige ser v Ferste state Date ser ser v	alue of the property
Yes. Fill in the information below. NCB MANAGEMENT SERV	/ICES		y nent for car deficien		/alue of the property \$290.00
Yes. Fill in the information below. NCB MANAGEMENT SERV	/ICES				
Yes. Fill in the information below. NCB MANAGEMENT SERV	/ICES		nent for car deficien		
Yes. Fill in the information below. NCB MANAGEMENT SERV Creditor's Name 1 ALLIED DR	/ICES	Wage Garnishm Explain what happen Property was r	nent for car deficien		
Yes. Fill in the information below. NCB MANAGEMENT SERV Creditor's Name 1 ALLIED DR Number Street		Wage Garnishm Explain what happen Property was r Property was f	nent for car deficien ned epossessed. oreclosed.		
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Case 19-17445-JKS Doc 1 Filed 04/11/19 Entered 04/11/19 22:58:29 Desc Main Document Page 47 of 63

	Arlene First Name Middle Name	Beckford Last Name	Case number (if known)
	Middle Hallie		
Vithi	in 90 days before you filed for bank	ruptcy, did any creditor, including	a bank or financial institution, set off any amounts from your
CCO	unts or refuse to make a payment l	pecause you owed a debt?	,
ĺΝ	lo		
] Y	es. Fill in the details.		
		North Arthur Head	gele for most set has popularly to extend of the
		Describe the action the creditor	ook Date action Amount was taken
Cr	reditor's Name		Trus untell
No	umber Street		 \$
		No.	
_			
_		*	The Control of the Co
Cit	ty State ZIP Code	Last 4 digits of account numbe	:: XXXX
/ithi	n 1 year before you filed for bankru	uptcy, was any of your property in	the possession of an assignee for the benefit of
edi	tors, a court-appointed receiver, a	custodian or another official?	the possession of all assignee for the penetit of
í N		oddiodidii, or another official:	
) Ye			
4 16	es		
5:	List Certain Gifts and Contri		
3 ;	List Certain Gifts and Contri	Dutions ————————————————————————————————————	
/ithir	n 2 years before you filed for bankr	untoy did you give any gifte with	a total value of more than \$600 per person?
		uptcy, did you give any gitts with	total value of more trial \$500 per person?
ŹΝ			
Ye	es. Fill in the details for each gift.		
	Na salah jarah kapatan basa basa kabupatan kabupatan kabupatan kabupatan kabupatan kabupatan kabupatan kabupat	The first teacher of the factors of the control of	To the developed by the determinant of the property of the pro
	Gifts with a total value of more than \$60	0 Describe the gifts	Dates you gave Value
	Gifts with a total value of more than \$60 per person	0 Describe the gifts	Dates you gave Value the gifts
		0 Describe the gifts	Dates you gave Value the gifts
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Per Per Per	erson to Whom You Gave the Gift umber Street ty State ZIP Code erson's relationship to you ifts with a total value of more than \$600 er person		the gifts \$\$ Dates you gave Value

City

Person's relationship to you

State ZIP Code

Case 19-17445-JKS Doc 1 Filed 04/11/19 Entered 04/11/19 22:58:29 Desc Main Document Page 48 of 63

r 1	Arlene			Beckford	Case number (if known)		
	First Name	Middle Name	Las	t Name			
/ithin	2 years before	you filed	i for bankruj	ptcy, did you give any gifts or cont	ributions with a total valu	e of more than \$60	0 to any charity?
1 No							
] Ye	s. Fill in the deta	ils for ea	ch gift or con	tribution.			
G	ifts or contribution	ne to obo	ritiaa			4 <u>2</u> 5 3844	
	nat total more than		Hites	Describe what you contributed	네프랑 항공하다	Date you contributed	Value
			* . **.				
						WWW. 1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1	¢.
Cha	arity's Name						Φ
							\$
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Nur	mber Street						
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City	y State	ZIP Code					
G.	List Certain			•			
6:	List Certain	LOSSE	5				
D h	escribe the proper ow the loss occun	rty you lo: red	st and	Describe any insurance coverage fo		Date of your	Value of property
				Include the amount that insurance has claims on line 33 of Schedule A/B. Pro	i paid. List pending insurance operty.		
	A PORT OF THE PROPERTY OF THE PROPERTY AS A PARTY OF THE PROPERTY OF THE PROPE	aarian ya di daasaa		en e			
							\$
			161646.1	; grunden intermentation representation in annual in the television construction and in annual in television in the te	TATIAN TATABAN		
7:	List Certain	Pavmer	nts or Tran	**************************************	obeside del del Merchille A. A. S. March, del grand of the grand common account of the analysis of the A. S. March of	A 7 SSAN A SANGUNA ANABORONA O O SANGUNA O PROPERTY PARTY OF ST	ETTS AND THE AND ARROWS AS THE THEORY OF THE PROPERTY OF THE P
ou co	n year before y	ou filea : seekina l	tor bankrupt bankruptcv ∈	tcy, did you or anyone else acting o or preparing a bankruptcy petition	on your behalf pay or tran	sfer any property	to anyone
				eparers, or credit counseling agencie		our bankruptcy.	
No							
Ye	s. Fill in the detai	ls.					
_				Description and value of any proper	ty transferred	Date payment or	Amount of payment
	oman Akopia erson Who Was Paid	<u>n</u>				transfer was made	
	9 Merkel Drive	e.		Attorney fee for bankruptcy	preparation	made	
	ımber Street				' '	04/11/2019	s 965.00
				ł			
	oomfold		07000				\$
Cit B I	oomfield	NJ State	07003 ZIP Code				
ro	· manakopian.I						
	nail or website address						
Pe	rson Who Made the P	ayment, if N	lot You				
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Debtor 1

Case 19-17445-JKS Doc 1 Filed 04/11/19 Entered 04/11/19 22:58:29 Desc Main Document Page 49 of 63

Date payment or transfer was made Date payment or transfer was made	ог 1	Arlene		_	Beckford	Case number (if known)			
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Person's relationship to you _

ZIP Code

Case 19-17445-JKS Doc 1 Filed 04/11/19 Entered 04/11/19 22:58:29 Desc Main Document Page 50 of 63

Beckford

No Yes. Fill in the details. Name of trust	Description and value of ti	he property transferred		Date transfer was made
	Description and value of ti	he property transferred		
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Name of trust				- Min - of Hamilton
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8: List Certain Financial Acce	ounts, Instruments, Safe D	eposit Boxes, and Storag	ge Units	
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losed, sold, moved, or transferred?				
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rokerage houses, pension funds, co I No	operatives, associations, and o	other financial institutions.		
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Arlene

Debtor 1

Case 19-17445-JKS Doc 1 Filed 04/11/19 Entered 04/11/19 22:58:29 Desc Main Document Page 51 of 63

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	First Name Middle N	ame La	st Name	_	The state of the s		
Have. ت	you stored property in	a storage unif	t or place other than your h	ome within 1 ye	ar before you filed for ba	ankruptcy?	
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₩ Y	es. Fill in the details.		ing the processing and present a	Tuy konteen his in to yer	er et et en		
			Who else has or had acces	is to it?	Describe the contents		Do you still have it?
			The second secon	- 11		. mananan kananan atau tanan menangai kan	Haverr
	Name of Storage Facility				_		□ No
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Part 9:	Identify Proper	rty You Hold	or Control for Someone	Elea			
as Davi	-				 		
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2		e.					
	es. Fill in the details.						
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For the For	Give Details As purpose of Part 10, the ronmental law means a ridous or toxic substantialing statutes or regular means any location, face it or used to own, operdous material means stance, hazardous material all notices, releases, are any governmental unit is located. Fill in the details.	e following defi any federal, stances, wastes, cations controlli cility, or prope erate, or utilize anything an ererial, pollutant,	mental Information initions apply: ate, or local statute or regul or material into the air, land ing the cleanup of these su erty as defined under any er e it, including disposal site nvironmental law defines as contaminant, or similar tel s that you know about, rega- nat you may be liable or pote Governmental unit	ation concernin , soil, surface w bstances, waste ivironmental lav s. s a hazardous w m. ardless of when entially liable un	ater, groundwater, or otes, or material. v, whether you now own vaste, hazardous substanthey occurred. Index or in violation of an	her medium, n, operate, or nce, toxic environmental law?	
For the Envi haza inclu Site utiliz Haza subs Report a	Give Details As purpose of Part 10, the ronmental law means a ridous or toxic substantialing statutes or regular means any location, face it or used to own, operdous material means stance, hazardous material all notices, releases, are any governmental unit like.	e following defi any federal, stances, wastes, cations controlli cility, or prope erate, or utilize anything an ererial, pollutant,	mental Information initions apply: ate, or local statute or regul or material into the air, land ing the cleanup of these su erty as defined under any er e it, including disposal site nvironmental law defines as a contaminant, or similar tel s that you know about, rega- nat you may be liable or pote	ation concernin , soil, surface w bstances, waste ivironmental lav s. s a hazardous w m. ardless of when entially liable un	ater, groundwater, or otes, or material. v, whether you now own vaste, hazardous substanthey occurred. Index or in violation of an	her medium, n, operate, or nce, toxic environmental law?	
For the For	Give Details As purpose of Part 10, the ronmental law means a ridous or toxic substantialing statutes or regular means any location, face it or used to own, operdous material means stance, hazardous material all notices, releases, are any governmental unit is located. Fill in the details.	e following defi any federal, stances, wastes, cations controlli cility, or prope erate, or utilize anything an ererial, pollutant,	mental Information initions apply: ate, or local statute or regul or material into the air, land ing the cleanup of these su erty as defined under any er e it, including disposal site nvironmental law defines as contaminant, or similar tel s that you know about, rega- nat you may be liable or pote Governmental unit	ation concernin, soil, surface webstances, waste avironmental laws. So a hazardous wern. Surdless of when entially liable under the control of the control o	ater, groundwater, or otes, or material. v, whether you now own vaste, hazardous substanthey occurred. Index or in violation of an	her medium, n, operate, or nce, toxic environmental law?	

Arlene

	Case 19-17445-JKS Doo	c 1 Filed 04 Documer			19 22:58:29	Desc Main
Debtor 1	Arlene		kford	Case number	(if known)	
	First Name Middle Name Las	st Name			,	
:						
25. Hav	e you notified any governmental unit	of any release of h	azardous material?	?		
Ø	No					
	Yes. Fill in the details.					
;		Governmental un	it .	Environmental law	, if you know it	Date of notice
			1100	Markhan - Ishaan ahan 11 mah 12 mah 1		
	Name of site	Governmental unit				
		_	-			
	Number Street	Number Street				
		City	State ZIP Code			
	City State ZIP Code	_				
26. Hav	e you been a party in any judicial or a	dministrative proce	ading under any c	nvironmentel le	ur? Instude settler	MARI PANISHAN KAMBANI PANIP POTTATI TUTTA TANDAR SANIP MARINA MARINA MARINA MARINA MARINA MARINA MARINA MARINA
Ø		ummistrative proce	eding under any e	nvnommentar ia	w? include settler	nents and orders.
i	Yes. Fill in the details.					
		Court or agency		Nature of the		Status of the
		ovair or agency		Nature of the	case	case
	Case title			-		Pending
		Court Name				On appeal
		Number Street		-		Concluded
		Manibal Odebt				Concluded
	Case number	City	State ZIP Code	-		
		•		Ē		**************************************
Part 1	1 Give Details About Your Bu	siness or Conne	ctions to Any B	usiness		
27. Wit	hin 4 years before you filed for bankru	ptcy, did you own	a business or have	any of the follo	wing connections	to any business?
	A sole proprietor or self-employed	in a trade, profess	sion, or other activi	ity, either full-tin	ne or part-time	-
	A member of a limited liability com	pany (LLC) or limi	red liability partner	rship (LLP)		
	A partner in a partnershipAn officer, director, or managing e	vacutive of a corn	oration.			
	An owner of at least 5% of the voti					
			ues of a corporation	on		
	No. None of the above applies. Go to f					
	Yes. Check all that apply above and fil		are the first of the second control of the second	es. Pitanteleisi	Naleosos, 12 Nos Sebes C	And that was a second of the
	Business News	- Describe me isti	ure of the business		Employer Identifica Do not include Soc	tion number ial Security number or ITIN.
	Business Name			THE PARTY AND A VERTICAL PROPERTY OF THE PARTY AND A SECTION OF THE PARTY AND A VERTICAL PROPERTY AND A VERTICAL PROPERTY OF THE PARTY AND A VERTICAL PROPERTY AND A VERTICAL PROPERTY OF THE PARTY AND A VERTICAL PROPERTY AND A VERTICAL PROPERTY OF THE PARTY AND A VERTICAL PROPERTY AND A	_ 3	Journy manage of film.
	Number Street	-		2.00	EIN:	
	THE PROPERTY OF THE PROPERTY O	Name of account	ant or bookkeeper		Dates business exi	sted

City

Business Name

Number Street

State ZIP Code

ZIP Code

State

Describe the nature of the business

Name of accountant or bookkeeper

From

_ To __

Do not include Social Security number or ITIN.

Employer Identification number

From ____ To ____

Dates business existed

Case 19-17445-JKS Doc 1 Filed 04/11/19 Entered 04/11/19 22:58:29 Desc Main Document Page 53 of 63

Arlene Debtor 1 Beckford Case number (if know First Name Employer Identification number Describe the nature of the business Do not include Social Security number or ITIN. Business Name Number Street Name of accountant or bookkeeper Dates business existed From ____ To ___ State ZIP Code 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. ZÍ No Yes. Fill in the details below. Date issued Name MM / DD / YYYY Number Street State ZIP Code Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 1 Signature of Debtor 2 Date 04/07/2019 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? V No Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? **☑** No Yes. Name of person_ . Attach the Bankruptcy Petition Preparer's Notice. Declaration, and Signature (Official Form 119).

Case 19-17445-JKS Doc 1 Filed 04/11/19 Entered 04/11/19 22:58:29 Desc Main Document Page 54 of 63

Fill in this in	formation to id	lentify your case:	
Debtor 1	Arlene First Name	T Middle Name	Beckford Last Name
Debtor 2 (Spouse, if filing)		Middle Name	Last Name
United States	Bankruptcy Court	for the: District of New Jersey	,
Case number (If known)			

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C1
Creditor's name: The Bank of New York Mellon	Surrender the property.	☑ No
Description of 64 Lindsley Avenue, Irvington, NJ 07111 property securing debt:	Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
securing debt.	Retain the property and [explain]: do a short sale	
Creditor's name: CREDIT ACCEPTANCE CORP	☐ Surrender the property.	□ No
Description of 2013 Nissan Juke property	☐ Retain the property and redeem it. ☐ Retain the property and enter into a Reaffirmation Agreement.	☑ Yes
	Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
	Retain the property and redeem it.	☐ Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
•	Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	☐ Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	**
	☐ Retain the property and [explain]:	

Case 19-17445-JKS Doc 1 Filed 04/11/19 Entered 04/11/19 22:58:29 Desc Main

Arlene		Т		DOC
irst Name	Middle Name	ı	ast Name	

cument Page 55 of 63
Beckford Case

Arlene		Т
First Name	Middle Name	

Case number (If known)_

	Part 2:	List Your Unexpir	ed Personal	Property Leases
--	---------	-------------------	-------------	-----------------

Lessor's name: Description of leased property: Description of leased property:	
Lessor's name: Description of leased property:	
Description of leased property: Lessor's name: Description of leased property: Lessor's name: No No No Pes Pes Description of leased property:	
Lessor's name: Description of leased property: Lessor's name: No Yes Property: Description of leased property:	
Description of leased property: Lessor's name: Pescription of leased property: Description of leased property:	
Description of leased property:	
Description of leased property:	
Description of leased property:	Merican de la companya de la company
Lessor's name:	
Description of leased property:	
Lessor's name:	
Description of leased property:	
Lessor's name:	
Description of leased property:	

Fill in this information to identify your case: Check one box only as directed in this form and in Form 122A-1Supp: <u>Arlene</u> Debtor 1 Beckford 1. There is no presumption of abuse. Debtor 2 (Spouse, if filing) First Name Middle Name Last Name 2. The calculation to determine if a presumption of abuse applies will be made under Chapter 7 United States Bankruptcy Court for the: District of New Jersey Means Test Calculation (Official Form 122A-2). 3. The Means Test does not apply now because of (If known) qualified military service but it could apply later. Check if this is an amended filing Official Form 122A-1 Chapter 7 Statement of Your Current Monthly Income 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form. Part 1: **Calculate Your Current Monthly Income** 1. What is your marital and filing status? Check one only. Not married. Fill out Column A, lines 2-11. Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11. Married and your spouse is NOT filing with you. You and your spouse are: Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11. Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B). Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Column B Debtor 1 Debtor 2 or non-filing spouse 2. Your gross wages, salary, tips, bonuses, overtime, and commissions \$<u>3,312.8</u>2 (before all payroll deductions). 3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3. 5. Net income from operating a business, profession, Debtor 1 Debtor 2 or farm Gross receipts (before all deductions) Ordinary and necessary operating expenses Сору Net monthly income from a business, profession, or farm here 👈 6. Net income from rental and other real property Debtor 1 Debtor 2 Gross receipts (before all deductions) \$_ Ordinary and necessary operating expenses - \$ Copy Net monthly income from rental or other real property 7. Interest, dividends, and royalties

Entered 04/11/19 22:58:29

Desc Main

Case 19-17445-JKS Doc 1 Filed 04/11/19

Case 19-17445-JKS Doc 1 Filed 04/11/19 Entered 04/11/19 22:58:29 Desc Main Document Page 57 of 63

Debto	1	Arlene First Name	Middle Name	T Last Nam	ne	Beckforc		Case number (if known)		
								Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
8. t	Jnemp	oloyment comp	ensation					\$	\$	
	ınder t	the Social Secu	rity Act. Inst	ead, list it here	e:		efit	<u> </u>	Y	
		you					_			
		your spouse					_			
9. I	ensic enefit	on or retiremer under the Soci	nt income. L al Security A	o not include act.	any amo	unt received that w	as a	\$	\$	
[2	Do not as a vic	include any be ctim of a war cri	nefits receivi ime, a crime	ed under the S against huma	Social Sec anity, or in	fy the source and a curity Act or paymenternational or dom age and put the to	ents received estic	d		
					_			\$	\$	
					_			\$	\$	
	Total	amounts from s	separate pag	es, if any.				+ \$	+ \$	
11. (Calcula column	ate your total on. Then add the	c urrent mo r total for Col	ithly income . umn A to the t	. Add lines total for C	s 2 through 10 for a olumn B.	each	\$ 3,312.82	\$	\$_3,312.82\\ \text{Total current monthly income}
Par	t 2:	Determine \	Whether th	e Means Te	est App	lies to You				
12.0	alcula	ate your currer	nt monthly i	ncome for th	e year. F	ollow these steps:				
•	2a. (Copy your total	current mon	thly income fro	om line 1	1		Co	py line 11 here 👈	\$ <u>3,312.82</u>
	P	Multiply by 12 (t	he number o	of months in a	year).				•	x 12
1	2b. 1	The result is you	ur annual inc	ome for this p	oart of the	form.			12b.	\$_39,753.78
13. 0	Calcula	ate the median	family inco	ome that appl	lies to yo	u. Follow these sto	eps:			
F	-ill in tl	he state in whic	h you live.			NJ				
F	Fill in tl	he number of pe	eople in you	household.		2			[
7	o find	a list of applica	ble median	income amoui	nts, go or	household line using the link t the bankruptcy cl	specified in t	the separate	13,	<u>\$ 82,263.00</u>
14. I	low d	o the lines con	npare?							
1	4a. 🔳	Line 12b is le Go to Part 3.	ss than or e	qual to line 13	. On the t	op of page 1, chec	k box 1, <i>The</i>	ere is no presumption	of abuse.	
1	4b. 🖵	Line 12b is m Go to Part 3 a	ore than line and fill out F	13. On the to orm 122A-2.	op of page	e 1, check box 2, 7	he presump	tion of abuse is deter	mined by Form 122A	1-2.
Par	t 3:	Sign Below	,							
		By signing/her	e, I declare	under penalty	of perjug	that the information	on on this sta	atement and in any a	ttachments is true ar	nd correct.
		Signature of	Inc	Beer	Hz	us.	_ x _			
		Signature of	Lebior I		F		Sig	nature of Debtor 2		
		Date MM / (DD /YYYY	<u>)(</u> (*)			Dat	mm / DD / YYYY		
		If you chec	ked line 14a	, do NOT fili o	out or file I	Form 122A-2.				
		If you chec	ked line 14b	, fill out Form	122A-2 a	and file it with this f	orm.			

Doc 1 Filed 04/11/19 Entered 04/11/19 22:58:29 Desc Main Document Page 58 of 63 Case 19-17445-JKS

B2030 (Form 2030) (12/15)

United States Bankruptcy Court

÷			District O	f New Jersey		
In	re					
A	\rle	ne Beckford		Case No		
De	btor			Chapter	7	
		DISCLOS	URE OF COMPENSATION O	F ATTORNEY FOR	R DEBTOR	
1.	nan ban	ned debtor(s) and that a new thick that the new to be the thick that the new that the thick that the new the new the new that the new that the new that the new t	29(a) and Fed. Bankr. P. 2016(becompensation paid to me within the paid to me, for services render nection with the bankruptcy case.	one year before the fili ed or to be rendered or	ing of the petition in	1
	For	r legal services, I have	agreed to accept		965.00	
	Pri	or to the filing of this s	tatement I have received		§ 965.00	
	Bal	lance Due	• • • • • • • • • • • • • • • • • • • •		\$	
2.	The	e source of the compen	sation paid to me was:			
		X Debtor	Other (specify)			
3.	The	e source of compensati	on to be paid to me is:			
		Debtor	Other (specify)			
4.		I have not agreed members and associa	to share the above-disclosed cortes of my law firm.	npensation with any of	ther person unless they are	9
		members or associate	share the above-disclosed compets of my law firm. A copy of the accompensation, is attached.	nsation with a other pe agreement, together wi	erson or persons who are n ith a list of the names of th	ot 1e
5.	In r	eturn for the above-dise, including:	closed fee, I have agreed to rend	er legal service for all	aspects of the bankruptcy	
	a.	Analysis of the debto file a petition in bank	r's financial situation, and render ruptcy;	ring advice to the debt	or in determining whether	to
	b.	Preparation and filing	of any petition, schedules, states	ments of affairs and pl	an which may be required	;
	c.	Representation of the hearings thereof;	debtor at the meeting of creditor	s and confirmation hea	aring, and any adjourned	

Case 19-17445-JKS	Doc 1	Filed 04/11/19	Entered 04/11/19 22:58:29	Desc Mair
B2030 (Form 2030) (12/15)		Document P	age 59 of 63	

- d. Representation of the debtor in adversary proceedings and other contested bankruptey matters;
- e. [Other provisions as needed]

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

Adversary proceeding, motions, lien stripping, etc.

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

04/07/2019

Date

Signature of Attorney

The Law Office of Roman Akopian

Name of law firm

UNITED STATES BANKRUPTCY COURT

District of New Jersey

In re:	Case No.
Arlene T. Beckford	Chapter: 7
Debtor	
	VERIFICATION OF CREDITOR MATRIX
The Above-named Del	otor hereby verifies that the attached list of creditors is true and correct to
the best of his/her know	
04/7/2019 Date:	Signature of Debtor

The Bank of New York Mellon 101 Barclays St 4-W New York, NY 10286

Powers Kirn, LLC 728 Marne Highway, Suite 200 Moorestown, NJ 08057

Credit Acceptance Corp PO Box 5070 Southfield, MI 48086

Lincoln Technical Instit 1777 Sentry Parkway West STE 403 Blue Bell, PA 19422

NJ Higher Ed Student Assit Authority 4 Quakerbridge Plaza Trenton, NJ 08625

Us Dept Of Education/Gle PO Box 7859 Madison, WI 53704

Bank of Missouri 5109 S Broadband Lane Sioux Falls, SD 57109

Aa Action Collection 517 South Livingston Ave 2nd Floor Livingston, NJ 07039

Ncb Management Services 1 Allied Dr Trevose, PA 19053

Forster, Garbus & Garbus 7 Banta Place Hackensack, NJ 07601

Officer Zachary Romano PO Box 565 Whitehouse Station, NJ 08880

Atlantic Health Systems Att: Payroll Dept. 475 South St Morristown, NJ 07960 Remex Inc 307 Wall St. Princeton, NJ 08540

PSE&G PO Box 1444 New Brunswick, NJ 08906

Credit Control LLC PO Box 187 Hazelwood, MO 63042

Saint Barnabas Medical Center PO Box 29960 New York, NY 10087

IC Systems PO Box 64437 St. Paul, MN 55164

BCA Financial Services, Inc. 18001 Old Cutler Rd, Ste 462 Miami, FL 33157

Senex Services Corp. PO Box 2184 Indianapolis, IN 46206

Credit Repair USA 222 Broadway, Suite 2426 New York, NY 10038

NJ EzPass 375 McCarter Hwy Newark, NJ 07114

RMCB PO Box 1235 Elmsford, NY 10523

IRMS c/o Abrams, Davis & Keller, Inc. 1201 Sussex Turnpike Randolph, NJ 07869 Union County College 1033 Springfield Ave Cranford, NJ 07016

AHS Hospital Corp d/b/a Overlook Medical Center 99 Beavoir Ave Summit, NJ 07901

The Grogan Law Group, LLC 17 Prospect St Morristown, NJ 07960

First Access PO Box 5220 Sioux Falls, SD 57117

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